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ABSTRACT

The theme of this convention was the impact of policy changes on practices in early childhood education worldwide, and particularly in New Zealand. Nine keynote addresses considered issues relevant to early childhood education. A total of 53 papers presented at the convention discussed: (1) cultural issues in early childhood education; (2) educational and recreational programs for young children in hospitals; (3) new ideas being implemented in early childhood programs; (4) links between parents and education professionals; (5) a model program to assist the integration of children with disabilities into their community; (6) training of early childhood staff; (7) parent education and support; (8) quality in early childhood education; (9) early childhood education policies; and (10) research in early childhood education. The names and addresses of convention participants are appended. A reference list or bibliography is provided with some of the papers. (BC)

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# Proceedings of:

# FIFTH EARLY CHILDHOOD CONVENTION

Dunedin, New Zealand

September 8 - 12, 1991

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Theme: The Impact of Policy Change

Editors: Max Gold, Lyn Foote, Anne Smith

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New Zealand has experienced some profound changes in its early childhood system since the previous early childhood convention in Wellington. The Dunedin early childhood convention has provided an excellent opportunity to reflect on those changes and to consider how well they are meeting the needs of children and families. We have a unique and diverse system which has many strengths but in which there are still areas of unmet need, and flaws which need attention. We were able to collectively strengthen our determination to retain what is of value in the system developed through years of co-operative work, and continue the process of positive change. Because we are a small and isolated country and few of our early childhood professionals have the opportunity to travel overseas, we need other perspectives and the convention was a welcome chance to meet with colleagues from overseas. In part their perspectives gave us the opportunity to value what is unique and excellent about our early childhood centres, but they also injected new ideas from the early childhood research and experience of other countries. We look forward to a similarly stimulating and challenging convention in 4 years time in Auckland.

To all the contributors who came from far and wide - Sweden, Britain, Canada, United States, Australia and all parts of New Zealand, a very special thanks for making this convention a successful one which has touched the hearts, stimulated the minds and contributed to the practice of many early childhood educators throughout the country. We hope that these papers will act as a valuable resource to all of you.

Ma te runga rawa koutou, e manaaki e tiaki.

Max Gold, Lyn Foote, Anne Smith

## ACKNOWLEDGEMENTS

The Fifth Early Childhood Convention was organised by a group of hard-working volunteers who are committed to improving the quality of early childhood educare in New Zealand. The organising committee comprised of:

**Convener**: Lyn Foote
**Co-Convener**: Max Gold
**Secretary**: Alice Turnbull
**Finance**: Carol Melville, Yvonne Sharp
**Administration**: Pat Irvine, Kathryn Palmer, Raewyn Penman, Carol Melville, Yvonne Sharp, Lynnette Cherrington-Peat, Catrina Beaumont
**Programme**: Anne Smith, Max Gold, Polly Mason, Lyn Stewart, Elizabeth Culbert, Pat Irvine, Sarah-Eve Farquhar
**Hospitality**: Noi Hudson, Roseann Hand, Lesley Pellowe, Annette Preston
**Publicity**: Sarah-Eve Farquhar

To each member of the committee a special thank you for the many long hours of work involved.

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# EARLY CHILDHOOD CONVENTION OPENING ADDRESS

Anne B. Smith

E NGA MANA, E NGA REO, E NGA KARANGARANGAMAHA
NGA MIHI AROHA KI A KOUTOU
HAERE MAI KOUTOU E NGA HAU E WHA
HAERE MAI, HAERE MAI, NAU MAI

It is quite overwhelming for me to see so many early childhood friends and colleagues from New Zealand and other parts of the world gathered in my home town, Dunedin. Welcome to you all. We have worked hard to make this one of the most exciting conventions ever and this has been a challenging task because of the high quality of past conventions. This convention will I think have a rather more international flavour than previous ones. There are colleagues and friends here from Australia, England, Canada Japan, the United States and Sweden. Please take time to talk to them as well as to the people you know. (I know what it is like to be at a conference in a strange country where you don't know anyone!) To me the international element to the conference is an important one - not only because it allows us to find out exciting things that are happening in other parts of the world but it gives us an idea of how other people view developments in New Zealand. I have just come back from a year overseas where I met many people working in early childhood. There is a growing interest in our New Zealand system which makes me proud to have been part of the reforms.

All of the previous early childhood conventions have made some impact on our thinking and progress towards common goals in early childhood, and this convention will be no exception. We all know that this is a particularly difficult time. It is important that we make good use of our time together so that we can develop united strategies to overcome current setbacks. In past conventions we have been able to point to some progress in New Zealand early childhood policy (however small) since the previous one - for example better funding for early childhood, improvements in quality, advances in training and better status. Many things have happened since our last convention in Wellington in 1987 - indeed the whole early childhood system has been transformed. Current cutbacks are all the more traumatic for us, because in the late eighties many of the blockages to progress which we had experienced in the sixties and seventies seemed to be falling away. This may be one of the few times in our history that we have actually seen the clock turned back - perhaps during the depression of the thirties would be the last time. But I want to focus for a few minutes not on our actual problems or achievements in early childhood but on how we in New Zealand, in my opinion, have achieved positive progress in the past and will do so in the future. Governments come and governments go, but the early childhood constituency - those who provide the energy, the philosophy, the programmes, and the person power to operate early childhood services go on as before and provide a continuing context for progress.

The people I met overseas were particularly impressed by our integrated early childhood services and our understanding that care and education are inseparable in early childhood. I believe that the integrated system which builds on this philosophy is almost unique in the world. Many countries (for example Sweden) have integrated administration and delivery for early childhood but there are still anomalies, for example they train early childhood nurses and teachers separately. Another development that has impressed people is the amalgamation of our two unions, the Kindergarten Teachers Association and the Early Childhood Workers Union. The historic uniting of these two into the Combined Early Childhood Workers of Aotearoa is an example of how we have got away from a competitive approach, to a pooling of our interests for the common good with a consequent increase in power and authority for different groups. This is a significant advance since 1983 when Dr Irving Lazar admonished us at Ngaruawahia that:

> The competition and hostility I've seen expressed between supporters of your variety of programmes is both ridiculous and self-defeating. All of your programmes are valuable, all serve children well, and serve families in different ways".

In April this year I went to a conference in Calgary, Canada on Gender and Knowledge and one of the papers I went to, was by a psychologist called Blythe Clinchy from Wellesley College in Massachusetts. As she started speaking at the conference on the topic of "Connected Knowing" my attention was grasped because what she was describing seemed to explain how we have made so much progress in our current early childhood policies in New Zealand.

Blythe Clinchy started by saying that in the academic world a type of knowing called "separate knowing" was given far more credit than "connected knowing". Separate knowing is sometimes called critical thinking. It is exemplified in the statement "I never take anything anyone says for granted. I always take the opposite position". It has been called the "doubting game". Connected knowing on the other hand is thought of as a somewhat wimpy way of knowing. It is a personal and empathic and perceptive way of knowing, exemplified by the statement "When I have a different idea from someone. I usually try to see if from their point of view" . It has been called the "believing game". Connected knowing is more common in women than men but it is gender related not gender specific. Perhaps because of its link with women it tends to be looked down on. People think that connected knowing is easier than separate knowing but this is not so. It involves being good at certain difficult skills . For example it involves listening - when you are listening you pick up all sorts of important information that people who only talk don't acquire. Connected knowing avoids conflict - deliberately refraining from criticism, withholding judgement even when you disagree, phrasing questions to clarify the other person's point of view. Connected knowing requires effort - putting yourself into the position of the other's person and seeing things from their perspective. Clinchy and her colleagues see connected knowing as like a net or web, suggesting

> a complexity of relationships and the delicate interrelatedness of all so that the tension and movement in one part of the system will grow to be felt in all parts of the whole. In the complexity of a web, no one position dominates over the rest. Each person - no matter how small - has some potential for power (Belensky et al, 1986, p178).

Separate knowing on the other hand involves being tough-minded - putting something on trial to see if it is wanting or not. The orientation is towards autonomy, rationality, logic and impersonal rules. Clinchy and her colleagues use the metaphor of the pyramid or mountain for separate knowing.

> On the metaphorical mountain the few at the top dominate the many on the bottom. Those near the base must move the whole mountain to affect those near the apex (Belensky et al, 1986, p179)

Blythe Clinchy wasn't saying that separate knowing was bad and connected knowing was good, but that both were important and that connected knowing had not been given the credit it deserved. She said that women can be good at separate knowing but that very few men could do connected knowing. She argued that women could slip from one code to another and use different kinds of knowing when it was required. She compared it with being bilingual. My feeling of revelation, while listening to Clinchy, was based on my perception that people in early childhood have used this capacity for connected knowing to move us towards a common understanding, a consensus about where we are going.

We are now in a government policy context which is not sensitive to our way of operating. There is no opportunity to consult, to listen to the voice of experience, to have a continuing dialogue or to learn lessons from the past. There is a determined adherence to the "we know best" approach.

Anne Meade believes our progress in early childhood policy is due to "cumulative discourse" and what she means is that people have talked to each other for a long time about the issues so that they understand each other and pass on what has been learned to new people so that they are able to use what has been learned to progress. The key to the success of cumulative discourse is that people are actually talking to each other and listening to each other so that connected knowing is possible. Anne believes that our joint efforts can compensate for the unequal amount of power held by women in early childhood.

This quote from Val Burns, the former director of the Early Childhood Division is a good illustration of how connected knowing works in the early childhood world. She said that progress towards various common goals in early childhood had happened:

> "..due to the combined efforts of all of the women in early childhood education. Many of us have been working a long time to achieve these goals. We have formed networks throughout New Zealand and kept close communication links. Many of us operate on a friendship as well as a

> professional basis. The cooperation, sharing of ideas, knowledge and skills has been a strength within the early childhood movement. We all hold to a common philosophy regardless of the slightly different ways we may express it, be it through kindergarten, playcentre, childcare, Kohanga Reo, Montessori, or Steiner movements".

Making available high quality educare in early childhood is the key to the reforms which have been brought about in early childhood. Any reduction in quality is a bottom line which we cannot allow to be lowered - the consequences for our most vulnerable young children will be devastating and one which the society will pay for in educational and social disadvantage for many years to come. It is therefore particularly important that we maintain and use our skills in connected knowing (to keep in touch with each other) and brush up our skills with separate knowing (for when it comes to dealing with the government) so that we can overcome temporary setbacks and continue progress towards our crucial goals.

NO REIRA
KI NGA KAIMAHI TAMARIKI NOHINOHI
TENA KOUTOU TENA KOUTOU TENA KOUTOU KATOA

## References

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Burns, V. (1990) The woman who had the most influence in my life was my mother. In May, H. & Mitchell, J. A celebration of women in early childhood. Centre of Early Childhood, Hamilton Teachers College, p 45-56.

# HOSPITALS MAKE A DIFFERENCE TO YOUNG CHILDREN AND FAMILIES...BUT IS IT HEALTHY OR HARMFUL?

by

Elizabeth Crocker, M.Ed.
Past-President, Association for the Care of Children's Health
Chair, Canadian Institute of Child Health

## Introduction

I want to commend the Program Committee for including a focus on children in hospital at this conference for three reasons:

(a) Because it brings me to your wonderful country which I have wanted to see for years;

(b) Because hospitalization affects so many young children...and to give substance to this point, let me quote some New Zealand statistics:

- by age 3, 30% of New Zealand children have had at least one exposure to hospitals, either through an overnight admission, a visit to emergency or an outpatient clinic visit
- by age 5, 40% have had at least one overnight admission
- by age 14, 60% have had at least one admission

and the effects of these hospital experiences can be quite profound;

(c) And because, while New Zealand has made great strides in terms of early childhood education that have been recognized the world over, my travels throughout your country have shown me that there is room for improvement in terms of enhancing the hospital experiences of children and families here.

My objectives this morning are to first create for you a context for my interest in this field, secondly to review the implications of hospital experiences for children and what can be done to reduce the potential negative effects, and thirdly to convince you that this topic is important for all of you and that we must all work together to bring about needed changes.

## How Did I Get Interested in this Field?

Once upon a time, I was a child. Like many of you in this room, I had an early hospital experience. My recollections of this event are very clear. I was five and was to be admitted to have my tonsils out on October 31. In North America, October 31 is a 'big deal' day because it is Hallowe'en...a night associated with witches and ghosts and goblins...but much more importantly, a night associated with going door to door saying 'trick or treat' and loading up with candy! Because I was to go into hospital on that day, my thoughtful mother arranged for me to go door to door in the neighbourhood, all by myself, on October 29. No wonder I remember this event. But, in fact, there is another very strong memory I have and that is that my mother stayed with me. All in all, this was a pretty positive experience.

When I was twelve, I was hospitalized again for almost a month. This time, I was on an adult ward of a general hospital, my parents visited me for a few hours every day, but other than that I never saw anyone who was remotely interested in my recreational, educational or social needs. I am horrified, in retrospect, to tell you that no teachers from my school ever came to visit either. Not such a positive experience - in fact, quite negative.

This could be a very long story but let me jump to tell you that, as an adult and after teaching school for four years, I ended up at the Children's Hospital in Halifax as Director of the Child Life Department which was responsible for meeting the educational and recreational needs of children in hospital, both inpatients and outpatients.

After two years, I realized I needed to know more because I was often confronted with people who would say things like "Do they really pay you to play?" or "What you do is nice but if money ever gets short, you'll be the first to go because you don't save lives." I would react strongly to these comments on a gut or emotional level but felt unable to come back with the kind of intellectual or statistic-based response to defend the importance of the work we were doing.

And so I left and researched the "non-medical" needs of children in hospital which, of course, are the same needs of any child for optimal growth and development, although the hospital experience, by its very nature, makes some of these needs more acute. I became convinced in the process of this research that many hospitals were and are guilty of what I call the "paediatric paradox"...that in spite of the Hippocratic oath which says "First, do no harm" we are not doing what we know to be important in terms of children's growth and development.

I should add that there is a large body of research to back up what I will say to you today...it's not just Liz Crocker from Canada making this all up. In fact there's so much research that I am reminded of the words of one person who said "We should do no further research unless we want to research why we haven't applied the research we have already done!"

## What Hospitals Are Like?

Hospitals are not at all like home. At home a child is exposed to consistent nurturing persons, family associates, regular play with peers, changes in environmental stimuli, usual school and extra-curricular activities, and independence appropriate to growth and development level.

In a hospital, however, a child is exposed to many people - in fact, it has been estimated that in the first 24 hours of hospitalization, a child can meet up to 52 new people. For a very young child that may be more people than he or she has met in his or her whole lifetime! In hospitals, there are also limited family associations, a strange environment, unfamiliar routines, limited or no play with peers, limited changes in environmental stimuli, limited or no school or extra-curricular activities, and a loss of independence. Perhaps the worst of all hospital situations is isolation where children are kept behind closed doors.

Children have told us what they think in their writing:

> "Dreams in the hospital come all in black."
>
> "The hospitals I don't like because of the beds you can't get out of."

In spite of all of the foregoing, I would argue that hospitalization can be a positive experience as long as a hospital has programs and policies that are family-centred, developmentally appropriate, and psychosocially sound.

## The Needs of Hospitalized Children

Those terms, "family-centred", "developmentally appropriate" and "psychosocially sound" may sound like buzz words to you, so let me explain.

Hospitalized children really have the same needs that all children have for optimal growth and development:

- the need for normal routines...routines establish some predictability in a child's life and when a child feels things are predictable, he or she feels secure to explore new things;

without predictability, children can become disoriented and overwhelmed and unable to explore

- the need for consistent contact with significant people (usually parents but sometimes grandparents, teachers, siblings)...as above, the presence of a significant person can give a child the sense of security to explore

- the need for interaction with a familiar and stimulating environment...if an environment is too stimulating, children will often pull back...just think what a hospital with elevators in a city like Auckland must be like to a two year old who has only ever known a farm. On the other hand, if an environment is too dull, children can find their own ways to create stimulation. Let's think, for a moment, of a non-hospital environment...think of waiting at an airport...adults will often cope with waiting by picking up a magazine or a book, but not the two-year old...off he or she goes and, lo and behold, a 'sand-box' is discovered...what fun...except it is really an ashtray. A hospital example might be leaving a young child in his or her crib only to return to find that the paper diaper has been torn up into small pieces like confetti and strewn all over the floor. Your reaction could be "Good grief, why has this child done this?" but, if the child could answer, it would probably go something like this: "Well, what did you expect...you left me in here without anything interesting to do and so I made up my own fun."

- the need for preparation for (or debriefing from) things that are new and possibly overwhelming.

All these needs are heightened in the hospital context because hospitals, themselves, can be so overwhelming, not to mention what anxiety or fear about a child's illness or injury can do to a person. I used to tell medical students that even though I am an educated adult with two university degrees, I can turn into an emotional noodle if my child has a temperature two degrees above normal! I can only imagine what is must be like if one is looking at the possibility of a diagnosis of leukaemia or injuries resulting from a serious car accident!

So what happens to a child who is overwhelmed or stressed or too stimulated or too bored or just plain frightened? I ask you to think of a turtle and think what a turtle does if it feels threatened. It just tucks in, right? And, as we would say in North America, "In that position, it ain't goin' nowhere!"

The same is true for a child...a child will also "tuck in" when stressed and when a child is "tucked in", it is also going nowhere, literally or physically, in terms of its growth and development.

All this now leads to the question, then, what do hospitals need to have in place if they want to make a healthy and not harmful difference in the lives of children and families?

## What Do Hospitals Need?

1. Open visiting for parents and siblings - You are doing pretty well in this regard in New Zealand. From my travels so far, it appears that parents and siblings are welcome in your hospitals. However, while I think you should take some credit for this, I urge you not to take this for granted. To reinforce this point, I want to share with you a letter written by a mother to a hospital which had an open visiting policy. I have changed the name of the hospital to protect the guilty:

> "My two year old daughter Rachel was a croup patient in Happy Haven Hospital for 4 1/2 days. She was examined in the emergency room and soon after admitted. While discussing her admission with the doctor, I asked if I would be allowed to stay with my daughter and was told there were no rules against it.
>
> Soon after arriving on the ward, the night nurse came in to my daughter's room and demanded that I leave immediately. I briefly explained the necessity of my staying and the doctor taking my daughter's medical history said I had a right to stay. The nurse reluctantly agreed but remained hostile.
>
> Two mornings later, the day nurse in charge informed me I would no longer be allowed to stay except during regular visiting hours. I then asked the staff doctor in charge of my daughter's case for permission to stay; he was curt and impolite and told me I was breaking hospital rules and he could not give me permission to stay.
>
> Although by then I was extremely shaken and crying, I persisted in my efforts to convince this doctor that my child's needs should be considered. I told him that:
>
> 1. Our first baby had died at the hospital and that before her death she had been dusky around the eyes and mouth, just as Rachel had been the preceding two nights.
>
> 2. Rachel had been in this hospital at birth, having had seizures, which caused us long term anxiety about her.
>
> 3. Our family doctor (who was out of town) who had cared for Rachel since her birth, and who knew our complete history had told me that I could stay with her and that she should be kept calm and quiet.

4. My being with Rachel helped her to settle easier and to get her breathing better rather than worse, which is what the hospital is supposed to be for.

The staff doctor repeated that I was breaking rules and stated that he had no authority to give me permission to stay. When I asked him who had such authority, he told me that only the Administrator of the hospital could do so. He asked if I wished him to make me and appointment with the Administrator and I stated that I did.

Approximately two hours later, having received no message concerning an appointment, I asked to speak to the day nurse in charge and asked her to make the appointment as the staff doctor had not done so. The nurse then asked to speak to me privately.

She questioned me on the events surrounding my first child's death. She then cheerfully informed me that it would not be necessary for me to speak to the Administrator - that parents of babies who have died at the hospital are given special consideration, and that I would be allowed to stay with my child. She added that she was sure the staff doctor and the night nurse in charge would agree with her decision. She then explained that she had based her initial decision on the wards not being "set up" for parents to stay overnight. But as the nurse agreed, I had not asked, nor expected, special accommodation, and I had not interfered in any way with hospital routine. Furthermore, the nurse admitted that my reasons for wanting to stay with my child were good ones, but stated, "If I had let you stay, then everyone would want to stay."

In conclusion I want to say that I object to the "no parents allowed" rule (restricted visiting hours). The "no parent" rule forces a busy staff to allow young children to lie crying in their cribs, gasping frantically for breath. This rule also encourages nurses to tie toddlers down under mist tents, rather than allow parents to stay and soother them. I do not think a parent should have to fight so hard to be with her child.

Signed: A concerned mother"

As you can see from this letter, the hospital's policy of including parents was frustrated by individuals who allowed their own biases to parade as hospital policy. This can happen anywhere, even here, and so I say to you "Don't relax...be ever on guard to protect the principle of family-centred care."

In fact, I can think of a current example of something that should concern you greatly. I understand that your government has brought in a budget that will mean that patients will be charged for the nights they are in hospital. I find this offensive enough but, when I heard that the government is also considering charging parents when they stay in hospital overnight with their children, I was incredulous. This policy intention is so stupid, so misguided that I find it hard to speak about. In fact, if anything, the government should be trying to encourage parents to stay in with their children and should probably think of an incentive policy whereby when parents stay overnight, they will not even be charged for their child's stay!.

You must fight this policy. It is morally and ethically wrong to place a financial barrier in the way of what we know to be important in terms of children's growth and development. If the government needs to raise revenue, it must not do it at the expense of what is good for children.

2. Preparation for and debriefing from medical and surgical events - Over 70 research studies have shown that children truly benefit when they can anticipate what's coming or understand what has happened. This preparation or debriefing must be more than verbal or pictorial...children must be able to learn from rehearsed experience or practice or play. In the words of the old Chinese proverb: "I see and I forget; I hear and I remember; I do and I understand."

People need to take the time to talk with children, too, to find out if they have any misconceptions about what is going to happen to them. Let me give you two examples...a young boy, about 5, was sitting on the side of his bed wearing a white johnny shirt indicating that he was about to have an operation. A doctor happened to see him sitting there and went in to talk to him. He asked the boy if he was having an operation and the boy replied "Yes, I am going to have my tonsils out." The doctor asked the boy if he knew where his tonsils were and the boy lowered his eyes and nodded a 'yes'. The doctor continued and said "Can you show me where?" and the boy again nodded and covered his genital areas with his hands. The doctor calmly asked (while he was saying to himself "Something's terribly wrong here") "Why do you think that's where your tonsils are?" The boy, using perfect logic for a five year old, said "If that's not where they are, why did they make me take my pants off?" Why should we expect children to know things if we don't tell them?

Here's another story. A little girl was told she was going to have a cardiac catheterization (which is a procedure used to determine the flow of blood through the cardiac system). When the time came to take this girl downstairs for the procedure, she was no where to be found. Finally someone spotted her under her bed, cowering in fear. It turned out that someone had told her that some dye would be used in the procedure but what the young girl had heard was the word "die". We need to make sure that children hear what we think we've told them. That will only happen if we take the time to prepare children through play and patient conversation.

3. Opportunities for the "normal routines" of play and school - Here is an area where the New Zealand experience is mixed. It would appear that some priority is given to children in hospital being able to still go to school. This is important for two reasons: (a) School is a huge 'normal routine' in the day of a school aged child and (b) children in hospital should not have to suffer what I call 'double jeopardy' - the misfortune of being ill or injured and the problems of struggling to catch up the work they missed.

However, even in New Zealand, this commitment to schooling in hospital seems to be at risk. I met with people at the hospital in Rotorua just a few days ago and the teacher's position there was to cease by the end of the week! I gather that one of the reasons being put forward for this decision is that the average length of stay in that hospital is quite short. But my response is that many children that are now being seen in hospitals are children with chronic illnesses, such as asthma, and may be in hospital a number of times each year. Therefore the cumulative total of time missed from school can add up.

The other 'normal routine' I want to talk to you about, though, is play. It is trite to say, because it has been said so many times, that "Play is children's work", but it is true. It is through play that children learn about the world around them.

Some might say, "Well children can play on their own; they do all the time". But I would argue that, in hospitals, you need a trained "play opportunist", someone who can be the catalyst, the therapeutic agent to help children 'un-tuck' (using the turtle analogy again).

Others might suggest that hospital play programs could be run by volunteers. But I would ask you if you would let your early childhood programs be led by volunteers? Beyond that question, I would remind you of the figure that children can meet 52 new people in the first 24 hours of hospitalization...an advantage of a trained play specialist is that he or she is a consistent face that a child can count on. Doctors are not always around, nurses change shifts, parents cannot always be there and volunteers come and go.

Let me share with you some other benefits of planned play programs in hospitals:

- Children find hospitals less strange if they can play with familiar things or play out familiar roles

* Children can express their concerns and confusions and receive accurate, reassuring information

* Children have safe outlets for their natural energies and anxieties (in fact, at least one study has shown that there are fewer accidents and injuries on paediatric wards where children are constructively occupied through play)

* Children can avoid boredom and pass time thorough constructive activity

* Children have a sense of autonomy and independence through play...hospitals by their very nature reduce a lot of the choices one has but in a play program, a child can choose the activity or toy that appeals to him or her

* Children meet other children and give each other much needed companionship and support; they often know how it 'really feals' and can share that feeling with others

* Children become more relaxed and cooperative for treatments and procedures if the have a chance to rehearse through play

* Children are reinforced in the knowledge that hospitals are caring places

* Children can integrate or work out upsetting experiences, because play can be a catharsis for pent-up feelings

* Children at play make their parents feel comfortable; as well, parents can learn both from observation of and participation with their children at play

* Children show the medical staff what their behaviours are when they are having fun and are not frightened; such observation of normal behaviour and development levels can aid in diagnosis and selection of therapeutic approach

* Children at play foster their physical health without realizing it. For example, blowing bubbles after a heart operation is fun, not therapy; playground activity is fun, not physiotherapy

* Children can be distracted from the reasons for their hospitalization, because play can be an antidote for pain

* Children are challenged and helped to mature through play

* Children, especially older ones, can learn to cope, to be brave, and to face hospitalization as an adventure and treat it as a 'growing up' experience.

Now that you are all totally convinced about the importance of play for hospitalized children, let me tell you how New Zealand is doing...actually, not very well. In spite of the fact that in 1978, the New Zealand Department of Health created an official position for hospital play workers, giving official recognition to the desirability of having workers in these position, there are fewer than 10 people so designated in the whole country.

Unfortunately, therefore New Zealand does not compare very favourably with countries like Canada where, beginning in 1992, it will be a requirement for hospital accreditation to have play specialists or Child Life Specialists working in paediatrics or Sweden where, for example, preschool children are entitled, by law, to the same play activities that would be available to them if they were not hospitalized.

It appears to me that there is a strange imbalance in New Zealand hospitals. Firstly, there are far more teachers than there are play specialists and secondly, there seems to be a significant separation between the two professional groups. It is as though this reality is based on a belief that until a child is five he or she plays and after that he or she goes to school. This, of course, does not match reality in any way...do you know any school-aged children who only go to school? Children are whole people, they are rounded individuals and it is important to not compartmentalize them in terms of professional function. What we need to do, as professionals, is not draw territorial lines but, instead, blur our roles and work together in the best interests of children.

The other problem, of course, with the numerical imbalance, is that the majority of children who are hospitalized in New Zealand and all over the world are under the age of five. The Minister's comment yesterday that there may be some funding available to hospitals via the 'before 5' program gives some hope to hospitals who are painfully aware that they are not fully meeting the needs of their young patients. However, until it becomes a reality, I hope you will all keep up the pressure for change.

4. Supportive, sensitive, enriched environments - I could spend days talking about this single topic but time only permits me to highlight a couple of points.

   * Hospitals need to understand that the most important impression that a hospital makes is often the first impression that it makes. Consequently, hospitals need to attend to entrance ways and corridors, information booths and even parking. All of these things should, in their own way, say "We understand children and families, we're glad to see you and we want to be of help." If getting to paediatrics is a hassle, families will be on edge from the beginning.

* Hospitals need to understand that the visual stimuli should be neither too dull nor too overwhelming. Too much of a good thing can be as bad as too little.

* Hospitals should try to find ways of personalizing children's spaces while they are in hospital. Individual bulletin boards allow children to put up their 'stuff'; some hospitals even have posters children can pick out and put on doors or walls to identify their room or their space.

* Hospitals need to make sure that their furniture is comfortable and does not give a hidden message. I was asked to work with one hospital to advise them on some structural and decorating changes and I noticed that the brand new chairs outside the Intensive Care Unit were very uncomfortable...the kind of seats that are put in fast-food restaurants that basically say "Don't stick around too long here." When I asked why this furniture had been selected, the response was "We thought these parents should go home and rest; we didn't want them to sleep here." When I asked what was happening, he replied, somewhat surprised "Well, the parents _are_ sleeping here; and I get complaints about the furniture!" He should have realized that parents do not want to leave wehn their children are in ICU. It really pays to ask 'users' what they need before decisions are made.

* Hospitals need to understand that children need to be with children. I know that often medical and surgical units are organized according to physician speciality rather than levels of growth and development. But this doesn't make it right. I believe it is crucially important for children to be with children, not among adults on an adult ward. This may be inconvenient for some staff, but hospitals must realize that they are service institutions and that they should serve the needs of their patients first, not their staff.

* Hospitals need to recognize that their environments are not composed just of rooms and hallways and interior decorating. The environment is also made up of people and, in this regard, I believe it is crucial for _all_ people who work in and for paediatrics to be oriented to the growth and developmental and psychosocial needs of hospitalized children and their families. The person who cleans the ward can be just as important as the doctors and nurses in the eyes of the patients. _All_ staff need to know that they can make a difference. Many hospitals are now going beyond orientation and also including an employee's relationship with patients and visitors as an element in the employee evaluation process.

And so we now come to the question we started with - "Are hospitals helpful or harmful?" I know you are waiting with bated breath for the answer, and here it is...the answer is "It depends".

It depends on whether the hospital has the programs, policies and professionally trained staff in place to ensure that children's growth and developmental needs are understood and met. You had probably hoped for a more definitive answer, but it is the same as the question "Are early childhood programs good for children?" I am sure you would answer in the same way..."It depends."

Apart from the question of programs and policies, however, "it depends" on the individual children as well. Some of you may know the work by James Anthony who has written so much about children who survive and do well in spite of awful circumstances. Anthony has also suggested that people can be characterized as either a glass doll, a plastic doll or a metal doll.

If you take these three dolls and expose them to a blow of the same force from a hammer, you will find that the glass doll shatters and cannot be fixed, the plastic doll is dented and may carry that 'scar' permanently but still functions as a doll and the metal doll is not affected at all except for the momentary sound of a 'ping'. Anthony says that some people , like the glass doll, are very fragile, but other people can withstand to greater or lesser degree some of life's tough experiences.

And so, whether hospitals are helpful or harmful depends, in part, on the actual personality make-up of individual children. What this means for hospitals is that they must work to identify the 'glass dolls' especially and make sure that their hospital experience is cushioned in the most supportive way. It is equally important to identify the 'metal dolls' because they can actually help you with all the others.

## How Important is All This?

For many of you, this talk about the needs of hospitalized children is new and you may be wondering if it is really important. Some of you may be thinking "Well if they are only babies, it won't matter too much." In fact, babies may be the most vulnerable group...just because they can't tell us what is happening in words, it does not mean they don't have reactions.

However, others may say "Well, children aren't in the hospital very long". I've already talked about the potential cumulative effect of several "not very long" hospitalizations but let me also share with you the results of a study with rather startling findings.

In 1975, a man by the name of Professor Douglas looked retrospectively at several thousand children in Britain to see if he could draw a correlation between children who had been hospitalized in early life and later problems. His findings, reported in Developmental Medicine and Child Neurology, were so surprising that Dr. Michael Rutter carried out a replication of this study a year later...and he reached the same conclusions. Professor Douglas' conclusion states the following:

> This study provides strong and unexpected evidence that one admission to hospital of more than one week's duration, or repeated admission before the age of 5, in particular between 6 months and 4 years of age, are associated with an increased risk of behaviour disturbance and poor reading in adolescence. The children who experienced these early admissions are more troublesome out of class, more likely to show unstable job patterns than those who were not admitted in the first 5 years. The children most vulnerable to early admission are those who are highly dependent on their mothers, or who are under stress at home at the time of the admission.

Let me mention, at this point, that "under stress at home" could be from anything from the arrival of a sibling to the death of a goldfish or a parent's loss of a job. When you think of climbing unemployment figures, in both your country and mine, "stress at home" is probably on the increase. This means that many children are extremely vulnerable.

And so, this whole area of the needs of hospitalized children is very important and can have very long term consequences. And now that I have you convinced about the utmost importance of this whole field, because of the possible long term negative consequences, I come to the question "Is this of any concern to those of you who are _not_ working in hospitals?"

## Is This of Concern to People Not Working in Hospitals?

I am sure that my answer of "yes" will not surprise you at all, but let me explain myself. First of all, you should be concerned because children from your own centres may be admitted to hospital and you should be aware of and care about the possible effects. You should anticipate that he or she may want (and be encouraged to do so) to play out his or her hospital experiences.

Secondly, even if one of the centre's children is not admitted to hospital, it may be that another family member has to go to hospital. You need to understand that hospitalization affects _every_ member of a family. Again, you need to be prepared for, or even facilitate through play, a child's expression of concern, fear, jealousy or confusion.

Thirdly, by virtue of your current roles, you are advocates for children. I believe you must be advocates for all children irrespective of where they are located...in other words, it is too narrow for you to simply focus on children in early childhood settings. This is especially so given that over half of all children in hospitals are pre-schoolers.

Last but not least, I believe you must be concerned because of my underlying commitment to "role blurring". What I mean is that we all have to work together and support one another. If we focus on professional territorialism, we may improve our professional reputation but we will not address the reality that children are whole people.

Plus we need each other. The work we all do is difficult and, given current economic pressures, things may get even tougher. Joan Baez, a folk singer from my early 'hippie' days was asked why she allowed herself to become pregnant given that the world was such a mess. People said "You even sing about how bad things are - why are you bringing another child into the world?" Her answer was simple and profound...she said "Because we need help."

One of my favourite expressions is "We nourish from overflow, not from emptiness." If we don't support each other, we will all, separately, become empty and unable to help.

The other reason we need to support each other has to do with being effective in bringing about change. I refer to the words of Malcolm X, one of the great figures in the American civil rights movement: "Power recognizes only power and all of them who realise this have made great gains."

If we work together and support each other, our collective voice will be bigger, harmonious and full of resonance - it will command attention and respect. The current economic climate virtually demands that we must work together for children because the voice of fiscal restraint is so loud.

This leads to one more important question that must be addressed...can we afford to do the things I have talked about today, such as having trained play staff in every hospital with a paediatric unit?

## Can We Afford Quality Care for Children in Hospitals?

I am tempted to answer this by simply saying "Can we afford not to?" But let me take another approach.

I believe that there should be a determination as to what comprehensive, quality paediatric care involves and then a commitment to provide nothing less.

Do you think for a minute that a surgeon who believes that a wound needs 20 sutures would allow someone in government to tell him that he can only use 10? Certainly not, because the surgeon would argue that that could damage the patient and would represent inadequate care.

What I've been talking about this morning is no different. Not meeting the psychosocial and developmental needs of children can also do damage and can also represent inadequate care.

Just because economic restraint is becoming the new government ethic doesn't mean that government's choices are always right. In fact, I believe that there is enough money in circulation in the world to do good things. For example, in Canada alone, $18 billion is spent on illegal drugs...that's an awful lot of money in circulation. It's just a question of gaining access to it and making choices.

Someone once said that "The economy is how we love each other publicly" and another phrased the same sentiment more candidly: "When the going gets tough, society is tested as to whether it shares or whether it's each person for himself."

And so we have choices to make. As far as I am concerned, we must invest in children from the beginning. In business terms, one is investing now for an ROI - a return on investment. If we don't, we will go into the 20th century with a generation of people ill-equipped to deal with the complex problems we are now facing.

We need creativity - mediocrity will not do. We need strength of character and courage of conviction - poor self-esteem will not do. We need both optimism and compassion - despair and anger will not do. We need people to be the best they can be - compromising people's futures will not do.

One of my favourite people in the health care field said "Paediatrics is the specialty of potentials". I think that is why so many of us are drawn to work with children...because you know that what you do can make a difference in terms of a child reaching his or her potential.

## Conclusion

Believe it or not, I actually have some hope for the future. It seems to me that people are beginning to understand how important the total health and education of our children really is.

In fact, I have just received a copy of the report of the National Commission on Children. It is titled Beyond Rhetoric and is wonderful in that it reflects a strong understanding of how important children are and how little time we have to do something about improving their circumstances.

The Chair of this Commission was Senator John D. Rockefeller IV. His opening quote is worth sharing with you:

> "Too many of today's children and adolescents will reach adulthood unhealthy, illiterate, unemployable, lacking moral direction and a vision of a secure future. This is a personal tragedy for the young people involved and a staggering loss for the nation as a whole. We must begin today to place children and their families at the top of the national agenda.

Well, Senator Rockefeller, I agree whole-heartedly. I applaud the work of this Commission and I just hope it, along with the concerns, energies and passions of all of you, will wake up the whole world to the importance of children, be they in hospitals, early childhood centres, home, school or exploring their communities.

In closing, I would like to share with you one last quotation. It is also from Beyond Rhetoric and was written by one of the world's greatest writers - 'Anonymous':

> The great events of this world are not battles and elections and earthquakes and thunderbolts. The great events are babies, for each child comes with the message that God is not yet discouraged with humanity, but is still expecting goodwill to become incarnate in each human life.

# CHILDREN'S EXPERIENCES IN CHILD CARE: DOES AGE OF ENTRY OR QUALITY OF CARE MATTER?

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Most North American children now attend some kind of child care arrangement before they begin formal school at five-years-old. With more than 50% of North American mothers returning to the out-of-home work force prior to their child's first birthday large numbers of our children are entering child care as infants. I understand that New Zealand is experiencing similar demographics. As parents, teachers, social policy makers, and as researchers these children who enter the child care system as infants are particularly interesting. Out-of-home group child care initially appears to be radically different than our traditional ideas about child rearing. Many of us in the audience spent our own earliest years at home in exclusive mother care. However many of us also have spent our own years as mothers or fathers with our own infants in child care. Furthermore work by Kathy McCartney and Deborah Phillips suggests that from an evolutionary perspective and when considering all cultures, not just those which derive from a European tradition, most children have experienced alternative caregivers and a peer group larger than siblings. Today I am going to talk about some of my own research with children who enter child care prior to their first birthdays. The majority of this work has been completed at UCLA with my competent graduate students particularly Claire Hamilton, Cathy Matheson, Leslie Phillipsen and Kirstin Droege. I was also involved in the USA National Child Care Staffing study along with my co-PI's Marcy Whitebook and Deborah Phillips and will discuss some of the Staffing Study findings.

## Children's development

In trying to understand the experience of children in child care I find this model useful. Lets begin at the bottom of the model, with the children. We are concerned with the short - and long-term development of the children in child care. The bulk of this concern falls in the area of social and emotional development, particularly attachment relationships and interactions and relationships with peers, and in language development.

## Attachment

Attachment theory suggests that the quality of the child's early caregiving experiences with significant adults become internalized into working models of the self and of relationships with others. Thus if you feel loved and as if your needs for emotional and physical care are met you are more likely to feel that you are a worthy person and have a positive orientation to others. The child who is securely attached is more likely to explore new environments and thus have appropriate cognitive experiences. The child who is securely attached also is more likely to act towards others as if they will be friendly and positive and thus tends to have positive social relationships with adults and peers.

This theoretical orientation, of course, raises many questions about children who enter child care prior to their first birthdays. The first set of questions concerns the mother-child attachment relationship. The second set of questions concerns issues of multiple and compensatory attachments.

*Mother-child attachments.* Much of attachment research has focused on the mother-child attachment as the most significant attachment relationship. Therefore one concern about infants in child care has to do with the influences of early care on mother-child attachment. In the late 1980's two researchers Clarke-Stewart and Belsky analyzed combined data from US samples and concluded that children who enter full time child care prior to their first birthdays have an elevated proportion of avoidant mother-child attachments.

Four points are important here to modify this statement:

1 The increased risk of avoidant attachment is not large - approximately 9%
2 Most children who enter child care prior to their first birthdays are securely attached to their mothers.
3 These findings may not hold true of all samples. I am working with a sample of children born just about the time these findings of insecure maternal attachment hit the popular press. In this sample children who enter child care as older children are more likely than children who entered child care as infants to be insecure.
4 We do not know what it means in the long term for a child who enters child care as an infant to have an insecure mother-child relationship. The body of research which informs us and does find consistent and strong relations between maternal attachment security and latter pleasant or aggressive relations with teachers and peers in school is almost entirely composed of children without child care experience.

*Alternative attachments* Which brings us to the second set of questions. Within the theoretical and empirical framework of attachment theory children early on form more than one attachment relationship. Attachments are formed with fathers, and with child care caregivers as well as to mothers. Therefore a child who enters child care as an infant has at least two attachment figures to use in forming internal models of self and other. The processes involved in forming internal working models when there are more than one attachment figure is not clear from the theory. One possibility is that the maternal attachment relationship because it is the most pervasive and often most emotionally loaded becomes the dominant influence on the child's representations. Another possibility is that maternal and caregiver attachments may be compensatory. Thus a positive maternal or caregiver attachment may compensate for an insecure attachment. A third possibility is that some developmental tasks may be more strongly linked to maternal attachments while others are more strongly linked to caregiver attachments. At present we have little evidence to support any one of these alternatives.

## Interaction and relationships with peers

The child who enters child care as an infant forms first relationships with peers simultaneously with forming relationships with adults. For such a child peers are an important part of the social matrix. There are almost always more peers than adults in child care settings so in seeking out a social partner a child is more likely to encounter a peer than an adult. Moreover the child must compete with peers for the attention of the adult and possession of toys and other material resources of the child care arrangement. The peer group in infant child care is an intimate one. Children learn to locomote, talk, and use the toilet in the company of peers. They sleep and eat with peers as well as play. Thus it is not surprising that we find children in child care to engage in more sophisticated behaviours with peers than we used to think was possible. Infants and toddlers in child care engage in reciprocal social and pretend play, comfort each other when distressed, and form friendship that often last until the children are separated to go to formal school.

The literature on the social competence of children with peers of children who enter child care as infants is mixed. There are studies that suggest that these children are more socially competent and studies that suggest the opposite. When results are as mixed as these it is usually because the story is too complex for simple answers. Therefore the age the child begins child care appears as a poor single predictor of the child's social competence with peers.

## Language

We know that children become competent in using language to communicate needs and ideas when they live in a language rich world. We worry about children who begin child care as infants, before they are proficient at language, because they could have fewer opportunities to engage in one-to-one interaction with adults and because they spend large amounts of time in the company of peers who have little language. The data thus far suggests that we have to think about two sorts of language competence. One type is verbal intelligence such as is measured by the Peabody Picture Vocabulary Test. This type appears to be best predicted by parental factors particularly maternal education and to be relatively uninfluenced by child care attendance. The second type of language development we have called adaptive language. This is the ability to use language to communicate and is far more susceptible, as we shall see to variations within the child care environment. There are few studies that simply compare the language competence of children who enter child care as infants with those who enter as language proficient children. If you look at the child care as intervention literature there are a number of studies that suggest that infant and toddler child care can serve as an intervention to enhance language development in at risk children. Therefore once again we do not have a simple answer to the question of whether early child care is detrimental to language development.

In summary if we just look at the children's development section of the figure and know the age the child entered child care we can predict relatively little about the child's development. Age of entry by itself does not tell us much. This suggests that child care for infants and toddlers is not a risk factor.

## Relationships with adults and peers in child care.

Let's move up a level in the figure to include adults and peers as well as children. From the child's point of view these relationships plus the toys and equipment is what is important. The infant or toddler doesn't know that she is part of a large social experiment in alternative patterns of child rearing. She goes to spend the day with her teacher Rosa and is in the same group with Jordan and Sara.

## Adults

Much as children's relationships with their parents have a number of interdependent domains or functional aspects children enroled in child care usually have multidimensional relationships with their teachers. Teachers function as playmates, teachers, managers and caregivers. Several studies suggest that child care teachers serve as playmates, engaging in reciprocal play with the children. Other descriptions of children's interactions with child care teachers emphasize the teaching dimension. Child care teachers in group care settings are also child managers, making sure that the children do not get lost, that the day flows smoothly, and that there is a minimum of intra-group conflict. Finally, and most importantly for our purposes, children have a caregiving relationship with their child care teacher. Concretely, the teacher is responsible for feeding the child as many as three meals and two snacks; keeping the child warm and dry; diapering, toilet-training, and/or handling toileting routines; and putting the child to sleep at least once during the day. in a more abstract sense, the teacher is responsible for keeping the child physically and emotionally safe in the absence of the parent. By leaving the child at child care, the parent explicitly or implicitly tells the child that the teacher is to be his or her main person until the parent returns.

In our work we have been particularly concerned with the caregiving aspect of the child care teacher's role. Specifically we have been examining children's attachment relationships with teachers. There are three data bases that form the basis of this work. One is the children of the US National Child Care Staffing Study. These 250 children were enroled in randomly selected child care centres in Atlanta Georgia. In the United States child care is regulated by the State rather than the Federal government. Georgia has some of the worst regulations and thus some of the lowest quality care in the country. The second two data bases were collected in child care centers and family day care homes in California where child care regulations and quality are considerably better but still low compared to other parts of the world. One of these consists of 72 children all enroled in child care prior to their first birthdays. We followed these children through their child care careers, observing them every six months until they entered formal school. The second data base consists of 100 children we first saw at 12 months and have continued following. They are now seven years old. About one-third entered child care as infants, one-third as three year olds, and one-third either entered child care as four year olds or never entered child care. We have data on all of the children at 12 months and 48 months as well as observations made in their child care arrangement soon after they entered child care.

We have observed teacher-child relationships in all of these children using an Attachment Q-Set. This Q-set provides a summary score for the child's emotional security with the teacher. We have also derived three categories of teacher-child relationships from the q-sort date. These are children who appear to be emotionally secure with teachers, children who avoid their teachers, and children who appear to be ambivalent about their teachers. These ambivalent children act as though they would like to be taken care of by their teachers but they don't trust the teacher to do so. We have also time sampled teacher involvement in the day to day lives of the children and rated teacher sensitivity. In the two California data bases we have also measured mother-child attachment.

We find that the children who have secure teacher-child attachment relationships also experience teachers who are involved with children, who engage them in reciprocal play and who respond to their social bids and teachers who are rated as sensitive. Furthermore the quality of the teacher-child relationship is independent of the quality of the mother-child relationship. Thus the quality of the child's relationship with the teacher appears to be best predicted by the child's direct experiences with the teacher rather than by what the child brings to the teacher-child relationship from the mother-child relationship. When we compare children who begin child care are different ages we find similar patterns. The nature of teacher-child interaction determines the teacher-child relationship even when the children enter child care long after establishing mother-child attachment relationships. These findings allow for compensatory influences of mother and teacher relationships. Because teacher and mother relationships are different and because teacher relationships are based on teacher-child interaction the potential influence of teachers on children's development is great.

We have examined teacher influences on both social competence with peers and on adaptive language. In examining teacher influences we consider the child's attachment relationship with the teacher, observed teacher involvement with the child and teacher socialization of peer interaction. Teacher socialization of peer interaction includes positive and negative mediation of peer contacts. Examples of positive mediation are the adult move or verbally guides the child so that she or he is in a good physical position for peer interaction, the adult explains the peer's behaviour to the child and the adult removes herself from the interaction and monitors the peer contact. Examples of negative mediation are when the adult removes the child from the peer contact with no comment on the peer interaction, the adult tries to remediate a peer conflict, the adult explicitly tells the children that they may not play together and when the adult reprimands a child for an action directed to a peer.

In each of our data bases we find that the child's attachment relationship with their teacher predicts the child's social competence with peers. In our longitudinal data bases we find that he child's first teacher relationship is more powerful in predicting social competence with peers than are subsequent teacher relationships. So for these children it is the teacher they had when they first entered child care, in many cases their infant or toddler teacher, who is the biggest influence on latter social competence with peers. In our studies where we have data on both mothers and teachers we find that teachers not mothers predict social competence with peers. These findings run counter to our intuitive notions of who should be most important, mother or teacher. These findings of the pervasive and important influence of teacher-child relationships are replicated in both Israel and in the Netherlands. These findings of the importance of the first teacher-child relationship also speak to the importance for children's development of making sure that our teacher, particularly our infant and toddler teachers are sensitive and involved with the children.

In our longitudinal California studies we did find some evidence for the influences of teacher socialization of peer contacts on social competence with peers. Socialization of peer contacts tends to be rather rare. Children who were playing with peers tended to be left alone while the teachers tended to other children or took a moment to chat or drink coffee. However we did find that children who received more negative peer socialization were less competent with peers. This could be because children who are less than competent with peers receive disproportionate amounts of negative attention or it could be because negative mediation doesn't work.

In a fourth study we did investigate relations between teacher involvement and children's adaptive language. This study was of 48 children enroled in a model child care center. Despite being a model child care center there were strong individual differences in the intensity of teacher-child involvement. Children, in this center who did receive higher levels of teacher involvement also had higher adaptive language scores.

In summary, if we turn back to our figure, we have some evidence to support relations (the arrows) between teachers and children's development. Teachers who are sensitive and involved with children are most likely to care for children who have secure teacher attachment relationships, are socially competent with peers, and are proficient in adaptive language. Teachers who use less negative mediation of peer contacts are likely to care for children more socially competent with peers.

## Peers

Lets now turn to the box on the diagram labelled peers. As we have said children in child care have intimate contacts with a relatively small group of peers. In all of our studies of young children in child care one very noticeable individual difference is in how much the children hang out with or orientate towards these peers. We find that some children act as though peers are invisible and either spend their time in child care alone, in solitary activities, or with the adults. Other children act as though the teacher was invisible and spend their time only with peers. A final group of children splits their time between peers and teachers. These early social orientations appear to be important in predicting children's development. Children who pay no attention to peers appear to miss out on some critical learning experiences. It seems that in order to become competent in engaging with peers you need to practice with peers. Engaging with an adult does not provide the child with the same sort of experiences. Children who score high on adult dependency and low on social orientation to peers do not appear socially competent with peers.

Children in child care peer groups begin to differentiate between friends and playmates as infants. We identify these infant and toddler friendships by observing shared positive contact particularly shared positive emotions between children. Almost all of the children we studied in the longitudinal study of children who began child care prior to their first birthdays had at least one reciprocated friendship. Friendships formed by the time the children were two years old were highly likely to persist, to be maintained throughout the preschool years. We found that the children who formed these early stable friendships were by age four the most socially competent of any of the children.

In summary the peer group also appear to influence children's development, particularly children who enter child care as infants or toddlers. Children who orientate towards peers as opposed to withdrawing from them or ignoring them and attending to adults appear more socially competent. Children who form friendships as infants and toddlers and are able to maintain these relationships throughout their time in child care also appear socially competent. These findings suggest that both experiences of engaging with peers in general and of forming and maintaining a relationship with a particular peer are important for children's development.

### The Child Care Environment

While for the children in child care their particular experiences and relationships with adults and peers are most salient and most immediately important these relationships and experiences are rooted within the child care environment. The child care environment plays an important role in determining the nature of adult and peer interactions. Turning to our figure I have selected three aspects of the child care environment as the most important: teacher education and training, child care quality, and turnover.

In discussing these aspects I will primarily draw on data from the US National Child Care Staffing Study. The Staffing Study was completed in 1988. We selected five representative metropolitan areas within the United States and within each of these areas we studied 45 full day, full year child care centers. The centers were randomly selected to match the distribution of centers serving high, low and middle income families and urban and suburban area. The final selection of centers matched the distribution of profit and not-for-profit centers in the United States and reflected our variability in State child care regulations. Within each child care center we randomly selected three classrooms to observe and six teachers to observe and interview. We also interviewed the child care center directors. The final sample included 675 classrooms and 1350 teachers. We interviewed teachers about their formal education and child related training and observed their caregiving sensitivity. We observed adult: child ratios and group sizes within classrooms and rated each classroom using the Harms and Clifford Early Childhood Environmental Rating Scale. We asked center directors about annual turnover rates and individual teacher about their job histories. Six months after our initial interviews we returned to the teachers to find out whether or not they were still in their jobs.

### Teacher Training and Education

In our work we considered formal education, how many years of school and whether the teacher has graduated from a university to be distinct from teacher training, whether a teacher had specific course work in early childhood education or a related field. In practice it was unusual to find teachers with college degrees and no specialized training in a child related field. It was also fairly unusual to find teachers college degrees. In the 12 years between national surveys in the United States there has been a decrease in the proportion of teachers with college degrees working in child care. Likewise while most teachers reported that they had some specialized training only a small proportion of the teachers has had 15 hours or more of child related training in the past year. Therefore compared to other parts of the world the United States teaching staff is relatively low in education and training.

Nevertheless we found strong relations between years of formal education and teacher sensitivity and effective teaching. Child related training was a strong predictor of teacher sensitivity and effective teaching for infants and toddlers but not for preschoolers. We have had two recent presidents in our country who suggest that anyone can teach in a child care center, after all isn't this what grandmothers and teachers have always done. These finding suggest otherwise. As Lillian Katz has eloquently expressed teaching in child care draws on different skills and knowledge than mothering. To have effective and sensitive teachers we need well educated and trained teachers.

## Child Care Quality

Child care quality is an important goal of most child care arrangements. We never hear people say what I am trying to do here is run a mediocre child care center, just the basics here, no frills. However quality is expensive and often sacrificed because of cost-cutting measures of public agencies or profit motives of private operators.

In our work we divide child care quality into structural quality and process quality. Structural quality includes aspects of care that can be regulated: primarily adult:child ratio and group sizes. Process quality includes the kinds of activities and caregiving that happens within the child care arrangement. Process quality is difficult if not impossible to regulate. Fortunately the two aspects of quality are closely linked. In fact in a recent analysis we found that changing the preschool adult: child ratio from one adult for eight children to one adult to ten children lowered the classroom a full scale point on the Early Childhood Environment Rating Scale.

Child care quality makes a difference for teacher child interactions. The Staffing Study replicated a line of about twenty-five previous studies in finding that when teachers had smaller groups and were responsible for smaller ratios they were able to engage the children in more developmentally appropriate activities and to be sensitive and effective in their teaching interactions. We also replicated a persistent and for the researchers sometimes annoying finding that child care centers that hired teaches with more formal education and training also had them teach with smaller groups, better ratios and more developmentally appropriate materials.

At this point I want to talk about another one of our studies that looked directly at the relative influences of child care quality and age of entry into child care on children's development. This was a longitudinal study that followed four groups of children between the time they were toddlers and the time they completed kindergarten. The four groups were: entered high quality child care prior to their first birthday; entered low quality prior to their first birthday; entered high quality child care after their first birthday; and entered low quality child care after their first birthday. Kindergarten teachers rated both groups of children enroled in low quality child care as having difficulties in kindergarten. They were more distracted, hostile and unpleasant than children who enroled in high quality child care. Our observations confirmed that children in low quality child care were less competent with peers than children in high quality care. Children who entered child care prior to their first birthdays and enroled in high quality care looked no different than children enroled in high quality child care after their first birthdays. However children who enroled in child care prior to their first birthdays and enroled in low quality care were more hostile and distracted in kindergarten than children who enroled in low quality care after their first birthdays.

In summary, quality of child care matters. Child care arrangements which high standards are more most likely to provide child care environments which facilitate the kinds of teacher-child and per interactions which lead to optimal child outcomes. Quality may be particularly important to infants and toddlers. It may be that these young children are especially vulnerable to the detrimental effects of poor quality care.

## Turnover

In the United States child care annual teacher turnover was 42% in the late 1980's and our more recent regional surveys suggest that it is increasing to between 50% and 60%. Turnover disrupts teacher-child relationships and ultimately children's development. In our longitudinal study of children who began child care prior to their first birthdays we found that children who lost a teacher between 18 and 24 months were more likely than children who did not lose teachers to form new insecure teacher-child attachments. In our study of the children of the Staffing Study we found that children enroled in centers with higher annual turnover rates spent less time engaged in social activities with peers and more time in aimless wandering.

Children's experiences in child care are disrupted when they change child care arrangements as well as when their teachers leave them. We find that children with the most frequent child care changes are generally less competent in their interactions with peers and teachers than children who experience fewer changes. This seemingly simple relation probably masks a set of more complex relations between child care changes and child care quality. While it seems obvious that if a child is in a high quality child care arrangement it would be optimal to remain there. However it is not as clear whether children in low quality care will benefit or be harmed by child care changes. For example moves between low quality care would probably be detrimental while moves towards higher quality care would be beneficial. However we are far from understanding the thresholds of beneficial change. In other words how much better does the child care quality have to become in order to make change positive?

The same kind of argument can also be applied to teacher turnover. We can all imagine or remember when teacher turnover was beneficial for a child. We do not yet fully understand what happens to teacher-child relationships after a series of insecure relationships or secure relationships. Our data does suggests that after about age three children who enter child care as infants rely on their previous experiences with teachers in forming new teacher-child relationships. That is the child tends to form to same type of relationship with the new teacher than he or she had with the old teacher. These findings again underline the importance of the infant and toddler's first teachers for their future development.

## Compensation of Teachers

Those of us who study child care, some of us who work in child care, and many of us who are child care advocates think about child care only as an environment for children. In reality it is also an environment for adults as well. Teachers as well as children spend their days in child care. The US National Child Care Staffing Study was one of the first studies to examine child care from the point of view of an adult work environment as well as a child development environment.

Our findings documented what those of us who have worked in the field know all too well. In the United States child care teachers earn about half as much as comparably educated women and about one-third as much as comparably educated men. The average child care teacher earnings place her at the poverty line. If there were sufficient spaces for subsidized children the children of the teachers would almost all be in subsidized child care. And 40% of the teachers did have children. Our image of child care teachers as either young single women or as supported by a more well to do husband are not correct. Child Care teachers in our sample were supporting themselves and their children.

Because child care teachers are responsible for their own and their families financial support they have trouble remaining in child care. The most often cited reason for teachers leaving their jobs was in order to earn a higher wage. Centers that paid higher wages had lower turnover.

Centers that made a commitment to paying higher wages were able to attract the teachers with the most education and child-related training. Furthermore child care quality was best predicted by teachers wages. Centers who paid higher wages also had better adult: child ratios, smaller groups, better Early Childhood Environmental Rating scores and more effective and sensitive teachers.

## Conclusions

Those of us who are child care advocates and child care researchers are living at an exciting time. As more and more families use child care services, child care becomes an important part of the public policy agenda. We have not answered all the questions posed by child care and children's development. We can however reach some tentative conclusions. First children's experiences with child care teachers and within their peer group matter for their long term development. Second the age the child begins child care is in itself not very important. However and this is the third conclusion: if children enter child care as infants or toddlers the quality of those first child care arrangements and the nature of those first relationships with teachers appear to be very important for their future social and emotional development. And finally unless we improve the level of compensation available to teachers in child care we will be left without a child care system that can nurture and support children's development.

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# THE TEACHER'S ROLE IN THE SOCIAL DEVELOPMENT OF YOUNG CHILDREN

Lilian G. Katz and Diane E. McClellan

## I. Social Competence in the Early Years

Although definitions of social competence in young children vary, they generally involve the ability to initiate and maintain satisfying, reciprocal relationships with peers. This ability depends on many kinds of social understanding and interaction skills.

### Components of Social Competence

***Social Understanding and Interaction Skills.*** Much social understanding and many skills are needed to maintain reciprocal relationships. Those children who have a basic knowledge of the language, norms, and customs of their peers are more likely than others to participate competently in their peers' activities. Children's growing capacities for communication, discussing, negotiating, turn-taking, cooperating, articulating preferences and reasons behind their actions, accepting compromises, and empathizing with others play a part in social interaction.

Children who resist or reject classroom norms and procedures do so for various reasons. Uncooperative and disruptive behaviors can be expressions of underlying emotional distress originating outside the classroom. Resistance to classroom procedures may be a manifestation of children's increasing but poorly managed autonomy (Crockenberg & Litman, 1990). In other cases, the resistance may be due to the developmental inappropriateness of the curriculum for the individual. The activities may be too formal, academic, or boring, or they may not be relevant enough to the child's experience. Sometimes either a permissive or an authoritarian classroom ethos may lead to the manifestation of social problems among children whose social functioning in other settings might be quite adequate. Some children create social disturbances because they cannot perform the tasks expected of them, and some cannot attend to the tasks because of their social difficulties. Social difficulties in the class may indicate that some children are too young to spend more than a few hours per day in a group setting or that the number of children with whom they must interact is too great for their stage of social development. However, since participation in a child care group setting is the best option available to their families, teachers look for ways to minimize the stresses some youngsters feel when surrounded by groups of peers for long periods of time.

The causes of early social difficulties vary widely. Some children are handicapped by an appearance or name that is unusual among their peers. Some children lack appropriate skills simply because of insufficient opportunity to learn and practise them. Teachers report that some children change residence so often that their budding relationships are often broken, and opportunities to form real friendships have frequently been thwarted.

Teachers and caregivers cannot always discern the underlying causes of the social difficulties they encounter. However, many of the pedagogical and curriculum decisions that teachers make have an impact on the social experiences of their pupils.

The research indicates that if children work or play alone primarily because they lack the understandings and skills required for satisfying interaction with other children, particularly if rejected by them, intervention may be required.

***Sociability versus Intimacy.*** On the basis of currently available knowledge of social development, we suggest that it is not a source of concern if children choose to work or play alone, as long as they are capable of competent and satisfying interaction with other children when such interaction is desired, appropriate, or necessary. In general, isolation and withdrawal in mild form are probably not related to later life difficulties.

## Influences on the Development of Social Competence

The development of complex peer interactive skills and the social understandings that contribute to social competence is influenced by many factors. Among them are the opportunity to observe and interact with peers and the guidance and support of parents, teachers, and other adults involved in a child's care and education.

***The Role of Peers.*** One of the most importance influences on children's social development is experience within the family (Feldman & Wentzel, 1990; Hartup & Moore, 1990). But not all the children within a particular family achieve the same success in developing social competence because the family does not provide a single environment. Therefore, the processes by which the children within the family acquire social understandings and skills are not easy to pinpoint. However, inasmuch as young children are spending increasing amounts of time in group settings, their teachers are able to play a significant role in shaping a child's experiences with peers.

***The Recursive Cycle.*** Evidence suggests that differences in preschoolers' social competence and peer acceptance remain fairly stable well into the elementary years and beyond (Ladd, 1983). Without some kind of intervention, children quickly assume the social status and behavior they held in past groups when they find themselves in new social situations (Dodge, 1983). This tendency is compounded by reputational biases that have been formed by middle childhood and may make it difficult for a child to break out of an established reputation even if new social skills have been learned (Bierman & Furman, 1984).

The long-range, persistent effects of early social difficulties may be understood as a recursive cycle phenomenon. The principle of the recursive cycle is that once individuals have a given behavior pattern, responses to them tend to elicit more of that behavior. For example, children who are friendly, likable, and attractive tend to elicit positive responses in others fairly easily. Because they receive positive responses, they become more friendly, likable, and attractive. Their opportunities to practise and polish social skills and learn new ones increase, and a positive cycle continues.

Similarly, children who are unattractive, unfriendly, and difficult to approach or enjoy tend to be avoided or rejected by others. In response to this avoidance and rejection, they tend to repeat the same patterns, often with increased intensity, making them even more unlikable and unattractive. This sequence increases the likelihood that these children will be avoided or rejected more and more often. Subsequently, their opportunities to interact with peers and to practise and polish whatever skills they do have gradually diminish. Thus a debilitating cycle becomes well established. Such social patterns, once organized, become more and more resistant to change with each uninterrupted recurrence (Cairns, 1986).

Children cannot break a negative cycle by themselves. Even adults who are aware of the need to modify their social responses have considerable difficulty doing so. They may try reminding themselves to "count to ten before speaking" or "bite your tongue" and may use other kinds of self-instructions with little success. One reason for the difficulty is that the patterns become so well learned they seem to occur automatically. Another is that social interaction results from largely unself-conscious behavior. Indeed, if we constantly monitored our own social behavior, it might strike a false note, seem affected, and be difficult to maintain for more than short periods.

Efforts to break negative patterns of social responses require a great deal of thought and intentionality on the teacher's part. We suggest, however, that one of the most important roles of a teacher of young children is to intervene on their behalf when they seem to be caught in a negative recursive cycle and to help shift them into a positive one.

On the basis of the research, it is reasonable to assume that, in principle, the younger the child, the more easily parents and teachers can help him or her overcome social difficulties. Children experiencing such difficulties during the preschool and kindergarten years can often be helped to shift into a positive cycle in a matter of weeks. When assistance is delayed until the middle childhood or adolescent years, the chances of successfully overcoming the difficulties are substantially more problematic.

***Learning through Interaction.*** Like most learning during the early years, social skills are learned and strengthened primarily through interactive processes. Social understanding and social skills - both adaptive and maladaptive - are learned primarily through the give-and-take of peer play and work. A child learns to be a friend or a bully through experience with others. However, interactions cannot occur in a vacuum: they have to have content. For sustained relationships to develop, the interactions between the participants have to be *about* something. In the case of young children, meaningful interaction is most likely to occur in the context of activities of genuine interest to the interactors. Thus the nature and content of the curriculum for young children is important to both social and intellectual development (see Katz & Chard, 1989).

***Learning through Observation.*** Many young children also learn social strategies from observing the interactions of others. They are especially likely to adopt styles of interaction observed within the family (Parke, 1990; Hartup & Moore, 1990). Many children are also keen observers of social life in the preschool setting, taking note of what can happen; what works; who is potentially dangerous, hostile, helpful, accepting; and so forth.

### Social Competence and Cultural Diversity

All cultures define appropriate patterns of interaction and feelings between adults and children, and among children themselves. Cultures vary in how much and in what ways positive and negative feelings are to be expressed in day-to-day social relations. Some cultures differentiate constraints and expectations for social behavior depending on gender more than others do. Some emphasize cooperation, competition, obedience, and other values more than others.

Teachers of young children cannot be expected to be familiar with all of the norms, values, and expectations of each of the cultural groups represented by their pupils. But awareness that there are such variations can go a long way toward helping teachers correctly interpret a child's behavior, feelings and needs. A child whose home culture encourages physical contact or the sharing of food between friends, for example, may take others' refusal to do so as a personal rejection. A teacher can help bridge the distance between the cultures of the children involved by indicating that children are used to doing many things differently at home. While the teacher can respect the cultural norms and values of social relationships a child brings to the school setting from home, she can also help each child to feel comfortable, included, competent and integrated in the classroom group, and the culture of the school.

***Social Skills Training.*** During the preschool years, interactive skills are not easily learned by means of direct instruction in the form of lectures, lessons, workbooks, magic circles, bibliotherapy, or similar moralizing approaches. It is doubtful that young children can be instructed in the discrete components of social skillfulness in a way that can significantly alter their social competence in the long run.

Once children have entered into a negative cycle, they need the help of an adult to break out of it. One way of helping is to identify the problem and then, by thinking of oneself as teacher, coach, and friend, gradually help them break the cycle. Mize and Ladd (1990) suggest that those who wish to identify the origin of a problem and help children change their behavior should consider three questions: (1) Do these children have the knowledge they need to be socially effective? Do they know, for example, that other children generally do not want to be friends with children who hit? They may know that they lack friends and - having heard it often enough - that hitting "isn't good", but have they made the connection between the two things? (2) Are the children able to act in accordance with their knowledge? (3) Are they able to apply the social understandings gained in interaction to future interactions?

As with most learning with young children, help in learning social skills is probably best carried out informally. There may be something to be said, however, for discussing and solving some problems away from the troubled context or after the heat of the moment, when neither teacher nor child is feeling defensive or angry over the incident in question. The usefulness of a postmortem analysis of this kind depends, to some degree, on the child's age and general ability to reflect on his or her own behavior.

These illustrations should not be construed as arguments against the usefulness of social skill training or direct instruction in social skills. These methods may be useful for some children, especially if they are closely tied to specific interactions and incidents. Rather, we suggest that intervention designed to change poor patterns of social interaction is likely to be most effective if it is offered in the context in which the faulty interaction occurs. In other words, an important ingredient in fostering good peer relationships in young children is the opportunity for them to interact about something significant in the presence of adults who, when necessary, can suggest social strategies appropriate to the context in which they are to be applied.

In our view, the preschool and kindergarten years are the best time to help children establish a positive cycle in their social relations. Teachers and caregivers can provide models of interactive skills, set patterns for class interaction, and provide help to children who are in the process of acquiring and strengthening social understanding and skills. The discussion below offers teachers some principles and strategies related to this important aspect of promoting children's development.

## II. General Teaching Strategies

The principles and teaching strategies outlined below are based on our understanding and interpretation of the evidence, our experiences as teachers, and our experiences with teachers of young children in a wide variety of settings.

### Optimum Teacher Intervention

Conflict is inevitable among members of any truly participatory group of children; it should not, and probably cannot, be completely eliminated. The spontaneous and inevitable social problems that arise as children work and play together put the teacher in an ideal position to advance children's social development. While intervention in children's behavior is an important part of the teacher's role, more is not necessarily better. Achieving the optimum level requires knowledge of each individual in the group and constant monitoring of each one's progress.

Teachers should intervene as little as possible, so that children can try to solve their own problems, but frequently enough to ensure that no child is falling into a negative recursive cycle. Good decisions concerning when to stand by and when to intervene depend on closely observing interactions and assessing individual children's abilities to resolve conflicts without adult help, assert and defend their rights, and engage in satisfying and constructive work and play.

### Social Difficulties as Opportunities for Teaching

Sometimes social difficulties in the early years are manifested in resistance to group processes and classroom routines and rules. Such "misbehavior" is best treated as an *opportunity to teach* children alternative, more effective ways of responding. While some social difficulties of children require help that a teacher cannot give, it is always appropriate to provide a context in which individual children can learn effective ways of handling their impulses and interacting with peers.

### Respect for Children's Feelings

To support children's social growth, the classroom environment should be characterized by respect for children's feelings. Some children are reluctant to participate in activities like storytime and physical exercises, or in group activities like singing, drama, and movement. To respect a child's feelings of reluctance to participate does not mean the teacher agrees that the feelings are justified. For example, a teacher can indicate that she accepts a child's fear of a situation without agreeing that the situation is dangerous.

In case of reluctance to join an activity, it helps if the teacher indicates that she understands the child may not feel like joining in at the moment, but when the child feels ready, she will be glad to help. The teacher can also offer suggestions about what the child can do while others are involved in the group experience. This strategy respects and accepts children's feelings as valid, protects their use of autonomy, and minimizes the likelihood that they will dig in their heels and transform their reluctance into stubborn resistance to the group norms. This principle, which is psychologically and ethically appropriate, is likely to minimize the development of a proverbial power struggle between teacher and child.

Crockenberg and Litman (1990) make a useful distinction between self-assertion and defiance in young children, the latter being negativism for its own sake and the former an expression of autonomy and competence. Defiance signals deep problems with authority that deserve special strategies, appropriate to the individual's psychosocial history. Crockenberg and Litman point out that authoritative (versus authoritarian) parents are those who exercise control and make appropriate demands for mature behavior, but also listen to their children and can be influenced by them. They report that "mothers who were effective in eliciting compliance from their children and deflecting defiance were very clear about what they wanted, but in addition to listening to their children's objections, they also accommodated them in ways that conveyed respect for the child's autonomy and individuality" (p. 970).

In the case of reluctant children who are not just being defiant but who are exercising their autonomy, we suggest accepting their feelings. As long as other aspects of their functioning in the class are satisfactory, the teacher can encourage them matter of factly to take their time and make their own decisions about when they are ready to change their minds.

We observed an example of an appropriate and effective application of this strategy in the case of a four-year-old who persistently refused to speak in the preschool setting, although her parents described her verbal behavior outside of school as entirely normal. Over a period of some months, the child's teachers tried to modify this behavior by insisting that she could not have her juice and crackers unless she asked for them, which she refused to do. Systematic observations of her behavior also revealed that other than at the daily snack routine, no one spoke to her: we learn early to speak only to those who respond to us! The strategy adopted was to say to her, in a calm and accepting manner, "Maybe you don't feel like talking right now. That's O.K. You don't have to if you don't want to. But when you feel like it, let me know!" The child's feelings were accepted as valid, and autonomy over her own behavior was supported. Within a week, she discarded whatever reservations she had and entered the verbal give-and-take of the classroom group easily, in spite of herself!

We suggest that, as long as no danger to the child or to others is involved in the incident in question, individuals should be allowed to have power over their own decisions, especially if a child is shy or self-conscious. If a teacher attempts to coax, cajole, nag, or push individual children into a desired behavior, they may feel intimated or threatened. Validating children's feelings reassures them that they are understood and respected and that help is available when it is needed or desired.

## Authentic Communication

A major responsibility of teachers is to help children with the transition from home to a group setting that has its own requirements and routines. For many children, the adults who educate and care for them in the early childhood setting are the first important relationships outside their families. We suggest that the ethos of the group is best if it is marked by straightforward and authentic communication about the norms, rules, and expectations for participation in the group.

***Establishing Credibility.*** In adult-child relationships, credibility means that children perceive the adults to mean what they say most of the time. Usually the degree to which a teacher can help young children acquire impulse control depends on how credible her suggestions, requests, and demands are and on whether the signals she gives concerning her expectations and standards are reasonably clear rather than mixed, confusing, or ambiguous. Credibility is strengthened when a teacher expresses her expectations simply and directly. It is undermined when teachers say things like, "We don't throw sand", especially when the child just did! It would be preferable to say directly something like, "I do not want anyone to throw sand", or "Sand is not to be thrown; it is to be used with the spade and containers".

Sometimes teachers mistakenly use questions as an indirect way to teach the rules. The following real-life examples illustrate the use of questions to tell children what is expected:

- A teacher responded to a child who demanded a place on her lap during storytime by asking, "How do you think the others feel when you sit on my lap during storytime?"
- A teacher who intervened in a squabble over the use of glue, asked, "How do you think someone feels when you grab their glue?"
- Intervening on behalf of an isolated child, the teacher asked, "Do you think we could ask Jake to play with us?"

What could the child say in answer to the first question? If the child says, "I Don't care", what could the teacher say: "You should care", or "That's not nice"? In the particular incident observed, it was reasonably certain that the child did know how most of the other children would feel, but that he could not postpone the strong impulse to be close to his teacher. Sitting on the lap of a reader is probably a very natural and pleasant way for a child to enjoy a story, and very likely many of the children in a preschool would welcome the chance to do so. Thus it would not help much to hint that the others would feel envious. It would probably be more helpful and credible to say, calmly and directly, "I know you like sitting on my lap at storytime, but

I want you to wait until I've finished", or "It's hard for me to read and see everyone with someone sitting on my lap", or something similar.

What if the child in the second case responded with, "He doesn't mind"? What could be the teacher's response? When the teacher asked the child the question, what she really wanted to do was indicate that the behavior was inappropriate. By asking the question instead, she undermined her credibility, and perhaps her authority as well. Most children who are involved in incidents such as the one in question know how the injured party feels, but this knowledge does not regulate their behavior. Asking a child in the heat of the moment how others might feel when their rights, desires, or needs are disregarded is rarely useful. While it may not hurt to urge a child to consider how the others might feel in many contexts, in those like the one described it would be more helpful to remind the child that next time he needs the glue, he can ask others for a turn to use it. If the child's communication skills are weak, the teacher can suggest an appropriate phrase for him to use. If a particular child is frequently involved in such incidents, it might help to stay close to situations in which the proprietary behavior is likely to occur and to intercept it in progress and to suggest alternative behaviors more firmly.

Now let us consider the third question, "Do you think we could ask Jake to play with us?" What can the teacher do if the children say "No" or "He stinks" or "We don't like him"? A more effective approach would be for the teacher to say to the children, "I think it would be a good idea to ask Jake to join us". The children might still disagree and give their reasons. But the teacher has clearly, honestly, and credibly expressed her view of desirable behavior.

A similar problem arises when teachers ask children who are squabbling about things like taking turns with equipment, "What could we have done about this?" or "What could you have said, Johnny?" or "What words could you have used?" These are a type of interrogatory question in that children feel compelled to come up with the answer the teacher wants. Interrogatory questions (i.e., ones to which the questioner already knows the answers) usually make respondents feel defensive. While the teacher's intention to remind children to use verbal approaches to resolving conflicts is appropriate, these essentially rhetorical questions are indirect. Rhetorical questions like these are phony or unreal and make the teacher seem like a wimp!

A similar pattern is often observed when teachers say to children, "You need to sit down", or "You need to wait till I call your name". Most children understand the teacher's message in these cases. But we question the wisdom of attributing needs to children. There is a sense in which someone telling us what we need is intimidating or threatening. We suggest instead that the teacher state her view of what is desirable by saying something like, "Please sit down", or "Please wait until your name is called".

Credibility is also undermined when adults use empty threats in attempts to modify children's behavior. Sometimes a teacher threatens children who do not cooperate in a classroom activity, observe a rule, or carry their weight with classroom responsibilities, by saying that they will not be allowed to enjoy some anticipated special treat. For example, she may say, "You won't be able to have popcorn later if you don't come to the reading group", or "If you can't choose a book during our library time, you will have to stay behind while the others go out to play". In the first place, it is difficult to make the threat match the deviant behavior. Second, threats are often too difficult to carry out on logistical grounds. Some children may sense that such threats signal that a teacher's authority is weak, and thus her credibility is undermined. Similarly, insisting that children make apologies for offending others when they do not feel apologetic can undermine the authenticity of the classroom climate. However, in such incidents a teacher might say something like, "If", or, "When you feel sorry, I hope you will say so".

***Simple and Straightforward Explanations.*** Many teachers (and parents) seem to believe that a violation of a rule should be followed by some kind of punishment. On the contrary, it is often equally or more effective simply to discuss the situation with the child. Maccoby (1980) found that the most effective parental discipline was confrontation of the behavior in a nonpunitive manner. Parpal and Maccoby (1985) also showed that young children were more likely to comply with their parents' requests (e.g., to do chores) when the parents had also been responsive to their children's requests, suggestions, and opinions.

The children of parents who emphasize discussion and who provide reasons when disciplining their children are friendlier than those of parents who do not (Aronfreed, 1968; Hoffman & Saltzstein, 1967). However, reasoning alone does not appear to be predictive of either positive or negative outcomes (Radke-Yarrow & Zahn-Waxler, 1986; Crockenberg & Litman, 1990). Similarly, Baumrind (1973) found that neither permissiveness nor strict authoritarianism was associated with happy, self-confident children. Rather, the confident children had a combination of warmth, demandingness, responsiveness, and firmness from their parents.

***Explicit Communication of Expectations.*** Teachers can help children acquire appropriate behavior by making clear to them what is expected and desired in a straightforward and matter-of-fact way. For example, some teachers try to get a child to attend quietly to a group time discussion by saying, "I like the way [another child] is sitting".

Most children understand that the compliment to the other child is intended to alert them to actual or potential negative evaluations of their behavior. Essentially an implied comparison, the statement carries the message that "I like the way Janet is sitting, but not the way Linda is behaving". This strategy is unlikely to build a classroom climate marked by group solidarity.

We do not wish to suggest that children should never be encouraged to engage in self-evaluation. Self-evaluation is part of the process of achieving self-regulation (Stipek, Gralinski, & Kopp, 1990). We simply wish to note that, in our observations of early childhood classes, this kind of attempt to coerce appropriate behavior, when overdone, can undermine the development of positive and accepting relationships among classmates.

Furthermore, the cumulative risks of complimenting one child in order to change the behavior of another are that children may learn that they are in jeopardy when another child is flattered. They may also learn that their own worth and acceptability are only comparative. This comparative method may teach children to feel that they are being put down when others are being approved. They may learn to take comfort in the criticism of their classmates. Some children may become excessively meek in the presence of authority or fearful of being pointed at in group situations.

A teaching strategy such as saying, "I like the way Lesley is sitting", may be effective in temporarily controlling behavior and may initially reinforce good or acceptable behavior. Such comments may also be helpful in the early stages of teaching children to be aware of the group and the effects their vocalizations and movements have on the group's goals and activities. However, our informal observation suggests that this strategy is often used manipulatively, sometimes indiscriminately, and is typically applied to a few of the same children repeatedly. All this indicates that the strategy is ineffective.

In other words, if this method of classroom management is used for about the first month of school and it is effective, it should need to be used only rarely thereafter. But if the teacher continues to use the method regularly, she does so because the technique is not effective. Again, in most cases, a clear, matter-of-fact statement of the behavior expected should be effective for young children. One of the main goals of guidance and limit-setting strategies is to help children achieve internal impulse control. Any put-down method that must be used over and over again with the same children is not achieving that goal.

A major feature of using the approach "I like the way Robin is behaving" is that it is designed to modify behavior by comparing children and through the comparison to show up faulty behavior. In terms of building a classroom ethos, frequent use of this implicitly comparative approach may undermine children's capacities to take pleasure in each other's good fortune, gifts, successes. It is preferable to say matter-of-factly, without rancor or accusation, something like "Please turn around and listen quietly" to the child whose behavior warrants it. Our emphasis on matter-of-factness stems from our view that teacher guidance of this kind, while it is essential, should not constitute a major focus of teacher-child interaction. Such actions by the teacher should not be affectively loaded so that they become a big issue in the class.

Many teachers see the comparative method (e.g., "I like the way Kim is sitting") primarily as a way of using praise to reinforce desirable behavior. In principle, however, it is best to use praise sparingly. It is doubtful whether children benefit from constant flattery and hearing repeatedly that they "did a great job". In fact, this approach may be counterproductive. Frequently, comments like, "I like the way you helped Annie", may suggest to the children that the teacher does not normally expect helpfulness.

In our observation, praise given too frequently is often intrusive and counterproductive to the development of children's capacity to become deeply absorbed in social and intellectual pursuits. In addition, it teaches children to focus on *how* they are doing rather than on *what* they are doing - a practice that in the long term is associated with weak persistence and lowered self-confidence in children (Dweck & Elliott, 1983). Furthermore, when praise is used too frequently, it is apt to lose its meaning. When it is not used enough, however, a few children may become dispirited and give up trying to meet teacher expectations.

Some teachers make approving statement (such as, "I like the way Robin is sitting") to each child in the group in turn to ensure that no one feels left out. With a group of 20 or more, this is a questionable use of time. A certain amount of order is liberating; too much may be stifling, and too little may impede realization of the teacher's educational goals. The purpose of rules and routines is to make it possible for the really important aspects of classroom life to go smoothly: the pursuit of intellectual, social, physical, aesthetic, and moral learning goals.

While it is never necessary to be unkind, or to humiliate or insult a child, it is sometimes necessary to be firm or even stern in a one-to-one context. Children are unlikely to be harmed by firmness directed to them by adults who clearly respect them and their feelings and with whom they have already established a positive relationship.

***Appropriate Use of Timeout.*** Informal observation indicates that a timeout or thinking chair is a common strategy that teachers use with children who violate classroom norms, particularly by being aggressive. Theories about why children exhibit inappropriate aggression fall into two general categories: the deficit theory and the excess theory. Deficit theory posits that children are aggressive because they lack something: some kind of social knowledge or skill, or sufficient impulse control. Some preschoolers, for example, may not know how to express their needs or wants and so resort to bullying to achieve their objectives. If they learn alternative skills with which to be assertive, their need for aggressive approaches can be substantially diminished.

According to the excess theory, children are aggressive because they cannot cope with their high levels of anger or aggression, and as a result their internal state pushes them to act out aggressively. It is thought that the habit of being aggressive will be reduced by getting children to control the excess anger or develop control over their aggressive impulses. These two theories are not necessarily exhaustive, nor are they mutually exclusive.

The thinking chair might be thought of as a generic solution that assumes that punishment is always the most effective response to unwarranted aggression. Anecdotal evidence suggests that the thinking chair is used excessively and ineffectively in ways that demean children.

We have found no research that describes what children think when they are sent to a chair or their room to think about their unacceptable behaviour. One of the risks of timeout procedures is that they may cultivate children's taste for revenge. If this happens, and the thinking or timeout chair is used repeatedly with the same few children, its effectiveness in developing a child's capacity for impulse control is questionable. Timeout procedures (e.g., a baby corner, timeout chair, bad chair) could be judged effective if they were rarely used for the same child more than two or three times. Furthermore, timeout procedures used as punishment humiliate children and violate the principle of respecting and validating children's feelings.

Another major disadvantage of using timeout as punishment is that it does not teach a child an alternative way of responding to the situation at hand. It is therefore unlikely to strengthen social skills. In fact, punitive timeout procedures often distract both the child and the teacher from the difficult processes of learning how to solve problems in social relationships. For the teacher, the problem is how to help a child change what is often a chronic tendency to behave in self-defeating, irritating ways that disrupt the rest of the class. From the child's point of view, because the disruptive child is frequently rejected by others, his or her behavior often leads to painful and difficult interaction with peers. The child and the teacher can both benefit from resolving the problem and ending a cycle of misbehavior and punishment, which is likely to reinforce the child's tendency to misbehave, rather than change it for the better.

An appropriate use of timeout procedures is to withdraw disruptive children from the flow of action they seem unable to manage so that they will calm down and regain control over their impulses. Such withdrawal, which is very much like a timeout in a basketball game, is not intended as punishment. For example, a teacher might say to a child, "Jane, I think a few minutes of rest until you are not quite so angry with Jill is a good idea. Then the two of you can figure out how you can both have a turn on the slide. Let me know when you're ready to work things out. I'll be glad to help." This strategy should be free of any hint of punitiveness.

***Motivating Children without Putting Others Down.*** Teachers and parents often try to motivate children by implying that undesirable behavior means that they belong elsewhere. For example, we observed a teacher chiding a first grader for inappropriate behavior by saying, "You're not in kindergarten now." In this case, a clear statement or description of the desired behavior would have been preferable. A comparative strategy of this kind is risky because it may undermine children's capacities to respond charitably to less mature children and may encourage them to take comfort from others' troubles. This strategy may also teach children to become disdainful of their own progress and previous efforts. We suggest instead that teachers strive to create a classroom and school climate in which children learn to regard younger children in a positive light. In such a climate, children learn to take delight in seeing how far they have progressed and to accept and respect where their younger peers still are.

### The Disposition to Approach Social Conflicts Experimentally

Many children have the understandings and skills to cope with social situations, but the disposition to use the skills is not sufficiently robust. For example, some children require encouragement to approach social situations involving turn-taking and confrontations as problem-solving situations. In such situations a teacher can help in several ways. Knowing from observation that a child who is being rebuffed is fairly articulate, she might ask the child, "What have you tried so far?" She can discuss what the child wants to try next to solve the problem. If the child is inexperienced, very hesitant, or not very articulate, the teacher can help by saying something like, "Go back and say, 'I want a turn!' If that doesn't help, let me know, and we can talk about something else to try."

If the teacher offers a strategy (e.g., "Tell Chris you want a turn") without adding the suggestion to return if it fails, and if indeed the strategy does fail, a child's sense of incompetence may be increased. In our view, adding the tag, "Let me know, and we can talk about something else to try", strengthens a child's disposition to approach social situations experimentally without feeling cut off when first efforts are flawed.

### The Content of Relationships

Sometimes teachers' attempts to deal with children who resist the classroom rules and routines become focused primarily on the undesirable behavior, the rules, and who will get the upper hand in the struggle. Violation of a rule, especially when others' rights or safety are at stake, must be addressed firmly, clearly, matter-of-factly and expeditiously. However, long-term social development is most likely to be supported when the teacher fosters a relationship with the errant child that centers on content other than the behavior to be changed. In other words, a child is helped when the teacher addresses the undesirable behavior firmly, consistently, and straightforwardly, and *also* develops her relationship with that child around a topic or activity of interest to the child. When the relationship between a teacher and a child is primarily about the child's misbehavior, teacher and child become locked in a power struggle.

Hawkins (1986) points out that the child and his or her behavior constitute appropriate content for a relationship between a therapist and patient. The content of relationships between teachers and pupils should be primarily about topics and activities unrelated to misbehavior, but related to intellectual goals of the program. Similarly, the teacher's interactions with the whole class should be mainly about what the children are learning, planning, and thinking, as well as their interest in each other, and only minimally about the rules and routines. One way to evaluate a class ethos is to assess the extent to which the content of teacher-child interaction concerns the routines and the rules of behavior rather than the ideas, activities, and other intellectual concerns.

### Fostering a Sense of Justice with Ground Rules

Teachers can help create a prosocial environment in the classroom when they indicate that the expectations and rules invoked apply equally to all children and that they respond to individual children's needs as they arise. For example, when the teacher indicates that hurting a playmate is not allowed, she could say something like *"I don't want you to hurt Jim, and I don't want anyone to hurt you, either."* By adding the second part of the statement, the teacher communicates a sense of concern with justice. The message is that the rule she invoked when she stopped the aggressor's behavior will be applied just as faithfully to protect the child should he or she ever be a victim of the same behavior. Similarly, she might respond to a child who is experiencing particular stress by taking that child on her lap. Then, if others demand a place on it too, she can say something like, "Joey is having a really hard time today and needs my special help right now. *On a day when you are having a hard time, my lap will be here for you, too."*

Some teachers fear that rejection of the second child's request for lap time will be perceived as unfair or unequal treatment. Research on parents' socialization of their children's sense of justice (Ross, Tesla, Kenyo, & Lollis, 1990) found that parents "instill a sense of justice in their children to the extent that they respect their children's views, clearly explain the logic of their own positions, and emphasize equality" in addressing conflicts (p. 994). We suggest that it is important to distinguish between treating children alike and treating them equally. Because children's needs, feelings, dispositions, and behavior vary, it would be unfair to treat them all alike. Instead, a healthy social environment is one in which children's individual differences and needs are responded to with equal concern and respect. In the second part of the two teacher statements suggested above, the teacher conveys the idea that the children are in a just environment - one where all children's needs are taken with the same seriousness as they arise.

### *Appealing to Children's Good Sense*

Giving children responsibility for developing some of the classroom procedures and rules signals to them that the teacher assumes that children's motives are genuine and sensible. For example, if children are working on a project, perhaps building a house together, and efforts are hampered by too many children working on the project at the same time, the teacher can suggest that they develop a schedule so that small groups can take turns working on it. If their schedule does not turn out very well, they can evaluate it, discuss the flaws, revise it, and try again. If the adults make most of the decisions and rules governing social participation, children are deprived of opportunities to use their judgment and exercise their good sense.

Studies of self-attribution processes suggest that when we address children believing that they are capable of approaching social conflicts and problems sensibly, they are apt to think of themeselves as sensible and responsible. Such self-attributions make it more likely that children will manifest their problem-solving, constructive, and other prosocial dispositions. Clearly, some children are more sensible than others. However, when teachers assume that children are usually motivated to engage in constructive and productive activities, teachers are likely to support and strengthen the children's dispositions to behave responsibly and sensibly.

### Character Definition

Most adults tend to define children's characters very early. We define subgroups as "the quiet ones", "the noisy ones", "the easy ones", and "the difficult ones". Or we define individuals with such designations as "the class clown", "the whiner", "the defiant one", and so forth. To some extent, defining children's characters is a type of shorthand and serves as a way of avoiding information overload. However, there is reason to believe that children tend to bring their behavior into line with the way they are defined by those who are significant to them. Rabiner and Coie (1989) speculate that one reason unpopular children experience repeated rejection is not that they do not know how to behave in socially skilled ways, but that they expect to be disliked and that this expectation prevents them from using the skills they have in their repertoires.

Rabiner and Coie (1989) reasoned that if they could induce rejected children to believe they were well-liked by their playmates, their behavior would become more confident and skilled, and they would in turn by more accepted by their peers. This was in fact what happened. The rates of acceptance by others did not change for a control group whose self-attributions were not changed.

Even adults have difficulty breaking out of the character definitions their families long ago assigned to them. We have heard many examples of adults who feel quite capable and competent among their friends and colleagues. When they visit their families, however, they are treated the way they were defined as children (e.g., indecisive, clumsy, timid), and they behave the way the family members expect them to. If adults cannot resist the definitions of significant others, we can easily see that children would feel compelled to behave as they believe they are expected to. Children defined as class clowns might feel they let others down if they fail to amuse one and all as expected!

Teachers often hear from other teachers about a child who is particularly difficult. Teachers often develop characterizations that cause them to focus on children's weaknesses and overlook their strengths. This occurs even for children whose behavior is not particularly difficult. Because character definitions have the effect of self-fulfilling prophecies, a teacher can help break a negative cycle by resisting the tendency to reinforce the negative definition of the child. A strategy teachers have found helpful is to imagine what particular children would be like without the difficulty that is causing the definitional problem. Thinking carefully and deeply about these children, the teacher creates in her mind as full a picture as she can of how they would behave, what they would say, how they would move, interact, and talk if they were free from whatever difficulties they have. Once this picture of what the children could be like is fully developed, the teacher can then respond to the children as she has imagined them to be.

Our experience with this approach suggests that it is helpful because the new definition of a child's character helps the teacher notice positive behaviors she had been unaware of before. The negative definition of the child's character had caused the teacher to focus on problematic behaviors and be constantly on the alert for their manifestation, so that she failed to notice the child's feeble and ineffective attempts to interact competently. The positive characterization helps the teacher to respond to the child more positively, which in turn increases the chances that the child will use his or her underdeveloped skills and thus shift into a productive recursive cycle.

The strategy recommended here for helping children with particularly difficult characteristics is another form of appealing to children's good sense as discussed above. In both strategies, the teachers' expectations can have a powerful effect on children's behavior. And in both, the point is not to manipulate children, but to realize how potent, though often subtle, the attitudes and statements of teachers can be in promoting or discouraging the acceptance of "difficult" children by others in the class.

### Allowing Time to Observe

Some children require time and freedom to observe others in action before they attempt social interaction. A child may seem to be spending inordinate amounts of time painting at the easel, when he or she is in fact keeping one eye on the other children and checking out what happens to those who play with this one and that one, what areas of play might be the least stressful for a beginner, whom not to antagonize, or who might be a pushover if a conflict arises.

Some children take longer than others to develop trust in adults outside the family. Children's sense of trust and affection for the teacher can form the basis of their desire to meet the teacher's expectations. If all other aspects of children's functioning raise no alarms, giving them time to observe and ease into group participation is likely to be an effective approach.

### Helping Children Cope with Adversity

Teachers help to educate children's feelings and emotions in the way they respond to their manifestation (Power, 1985; Leavitt & Power, 1989). Thus one of the responsibilities of teachers is to help children distinguish between what is a tragedy and what is not. A classroom climate can become very contentious if many of its members treat every other reversal as a personal tragedy. Young children should not be encouraged to believe that it is a disaster if they miss a turn with a toy. Children do not always have to get what they want. When one child knocks down another's blocks, it is unfortunate and annoying, but not a disaster; most structures can be rebuilt. If incidents of this kind occur frequently, then other principles of teaching and curriculum have to be considered.

Similarly, children do not have to be liked or accepted by all the children in their group all the time. If individual children complain that another child does not like them, the teacher can acknowledge that the event is regrettable and remind them that they have other friends; or she can let them know that *she* is glad they are in the group.

On the other hand, when someone is suffering, is in real pain, is hurt, or is about to move away and be separated from loved ones, it is appropriate to experience deep sorrow, and teachers can reassure children that the sadness, though hard to bear, will subside.

If children make an inordinate fuss about not getting a turn with a toy or about accidental damage inflicted on their work, the teacher can say something like, "I know you're disappointed, but there are other things available for you to play with", or "I agree it's annoying when your work is spoiled, but you can make it again." These are the sort of statements teachers can use to validate a child's feelings without agreeing that they are appropriate. The use of such statements minimizes the chances of the classroom climate being marked by excessive emotional outbursts.

### The Teacher as Model

Because modeling is such a powerful way of learning, it is a good idea for the teacher to be particularly alert to her interactions with the children (O'Conner, 1969, 1972). For example, when she is helping to resolve conflicts or is making suggestions to children about their interactions with others, the teacher can make sure she is interacting rather than lecturing. Sometimes the interaction will involve finding out what happened and what each child's goals were when the conflict or problem occurred. Soliciting the children's reaction to the teacher's suggestions (e.g., "Would it help if you put up your buildings on opposite sides of the mat?") is also appropriate at times. As long as the question put to the children is genuine and not an oblique command, the children can see this strategy as a model of how to approach conflicts. Not every suggestion needs to be handled in this way. But soliciting the children's ideas and remaining open to the cues in their behavior helps the teacher to make informed suggestions. Soliciting information and ideas from children models an interactive style of relating to others and seeking solutions to problems.

## III. Specific Teaching Strategies

### Fostering Social Understanding

A number of the components of friendship-making skills have been identified. Extensive research comparing well-liked children with those who are not well-liked indicates that social knowledge plays a significant role in initiating and maintaining successful relations with peers (Gottman, 1983). Some children need help to understand that some peers have experiences, backgrounds, desires, family routines, and points of view that differ from their own. The following discussion covers strategies that teachers can use to bring about this understanding.

***Arousing Children's Empathy and Altruism.*** In some contexts it is appropriate to stimulate children's empathic and altruistic dispositions. Suppose, for example, that a child has been waiting a long time for a turn with a piece of equipment. When the teacher feels that the child who is using the equipment should yield it to the child who is waiting, she can calmly say, "Robin has been waiting a long time, and you know how it feels to wait." The second part of the statement is made in a straightforward manner that conveys no accusation of meanness or shame or any other negative characteristic. Along the same lines, a strategy that may be particularly important in the case of aggressive children is to help them develop some understanding of the effect of their actions on other children and of others' feelings in difficult situations.

***Alerting Children to Others' Feelings and Interests.*** In appropriate contexts it is helpful for adults to alert children to others' feelings and interests. For example, in the course of a discussion about plans for an activity, a teacher might ask one child or several children what they think an absent child might prefer, or how that child might react to the plans that have been developed thus far. This strategy differs from the one discussed earlier where the teacher asked, "How do you think the others would feel if I let you sit on my lap?" This question is an indirect attempt on the teacher's part to decline the child's request and is rarely intended to develop understanding and insight. The strategy recommended here is intended to stimulate and strengthen children's dispositions to anticipate others' feelings and to be aware of others' interests. When teachers raise these issues, they convey the idea that general sensitivity to others' opinions, interests, and feelings is valued.

We observed a good example of the appropriate use of this strategy in a class of four-year-olds. The teacher talked with them about four absent children who were expected to move to another school after the holidays. She began the discussion by telling them which children would not be returning and saying, "I think it would be nice if our class gave them something to help them remember their time with us. Any ideas about what we could do?" About half of the group offered suggestions; most of the others reacted to the suggestions offered. The discussion ended with general agreement that the children should prepare a picture for each of the departing children to hang up in his or her new home. Further discussion led the group to divide themselves into four groups; each group volunteered to produce a picture for one of the departing classmates. The teacher then led the whole group in a discussion of what the group's members thought each of the departing students would find most interesting and enjoyable about their experience in the class. During the discussion, children shared their recollections of each of their absent classmates' interests, favorite field trips, and so forth. The pictures that the four groups enthusiastically produced were delightfully detailed and personalized.

This strategy need not be used only in the context of conflict. It is appropriate for any context in which a variety of feelings and opinions are present - not just for contexts involving injury or crisis. The goal of the strategy is to develop children's dispositions to speculate and to predict and anticipate the responses and feelings of peers to various events and experiences.

***Encouraging Alternative Interpretations of Behavior.*** Sometimes children assign negative labels to peers who are different or difficult or whom they dislike. They may try to nickname a classmate as "weirdo" or "nerd" or apply to the classmate the current, favorite insult. A teacher can cultivate a constructive social environment by encouraging the accusers to consider other ways of interpreting the labeled child's behavior. The teacher might mention that the labeled child is new to the class or that the child's family does things differently. Whether the teacher happens upon the correct interpretation of the labeled child's unique characteristics does not really matter. The important point is to communicate to the labeling children that she expects them to think about reasons for the differences among the children in the class, that *she* accepts the differences, and that she expects the children to respect the differences.

From time to time, teachers are confronted with children who tend to disrupt large or small group discussions or work by making comments unrelated to the situation, and whose comments are described as "off-the-wall". Unfortunately, such children are readily labeled by their peers as "weirdos". In some such cases, the behavior is the result of insensitivity to their peers' interests and inability to read social situations accurately. In other cases, the child changes the subject because he or she cannot contribute to it and feels left out. Others may behave this way because they are way ahead of their peers on the subject and lack patience with those behind them. In each of these cases, the children need the teacher's assistance if they are to learn to participate in group discussions in an appropriate manner by gaining insight into social situations.

In the first two cases, a teacher can help by offering suggestions about topics that might interest children or by indicating topics likely to interest particular children. In the third case, the teacher can encourage the child to be more patient and at the same time can validate the child's feelings by indicating that it is sometimes hard to wait when a discussion is going slowly. The teacher's remarks should not be heavy-handed, nor should they imply that the children are in any way selfish or mean.

***Helping Children Discover Common Ground.*** The development of friendships can often be eased when would-be friends discover interests, experiences, or preferences they hold in common (Gottman, 1983). A teacher can prime the pump by indicating what interests or experiences one child holds in common with another child. These shared interests may form the basis of a solid friendship. So, for example, a teacher might say to a child, "Jenny also collects shells", or "Jimmy is interested in dinosaurs too." When a child is eager to share news about a trip to the children's museum, the teacher might say, "Don't forget to tell Jean about what you saw. She went there last week."

This strategy is consistent with the more general strategy of referring children to one another so that they develop the disposition to share thoughts and feelings and to recount experiences to each other. This practice can foster a pattern of frequent child-child interaction so that communication does not always have to be directed to adults or pass through them.

### Strengthening Interactive Skills

***Approach Strategies.*** Some children find it easier to enter ongoing play groups when they are able to use opening gambits. Depending on the child, the suggestion can be quite indirect or very specific. As suggested in the discussion above, if individual children are making good progress in verbal interactive skills, the teacher can discuss with them what they have tried and what they think they should try next. But in the case of a child just getting started on interactive play and with few verbal skills, the teacher can be more direct. Suggestions could include statements such as, "Go to Jane and say, 'Can I work on this side of the building?'" The teacher should model the appropriate tone for the request. A teacher who wishes to take a more indirect approach could suggest that the child ask other children what they are planning, doing, or making. Children can also ask how they might be able to help. It should be noted that approaches to groups are likely to be successful if the approacher makes positive comments about what the group is doing.

***Verbal Approaches.*** Verbal skills play a critical role in social interaction, even in the early years. Teachers can help children develop verbal skills by indicating to the children ways in which they can state their feelings, desires, and ideas clearly. The teacher's knowledge of each child provides a basis on which the teacher can offer suggested phrases at the appropriate level of complexity. For one child, the suggestion might be, "Say to Ann, 'Please pass me that crayon', or 'I want to use the paint brush a bit longer'." For another child, the suggestion might be, "Let Jimmy know that it bothers you when he makes the table shake." In some cases, it is useful to suggest topics for conversation. The specificity of the suggestions offered should depend on the teacher's assessment of the child's competencies.

***Turn-Taking Skills.*** Parents and teachers often urge young children to share their possessions. But more often than not, the appropriate behavior is turn-taking. A large part of social interaction requires turn-taking. Conversations, discussions, carrying one's weight in the household duties, and using the amenities all involve some form of coordinated turn-taking. Turn-taking involves being able to detect cues in the partner's behavior indicating that the other is about to bring his or her turn to an end, discerning what moment would be the most propitious to press for one's turn, and so forth. Mastery of these skills takes time and lots of experience.

One of the common complaints that young children bring to their teachers is that another child will not allow them to have a turn with an object or piece of equipment in short supply. As suggested above, most of these cases can be resolved by encouraging children to return to the situation and ask for a turn. The teacher should indicate that if that does not help, the children should come back and consider another strategy with the teacher. Children who resist the request to give a turn beyond a reasonable amount of time can be reminded that others are waiting.

Two further considerations discussed above should be kept in mind here. One is that the type of incident in question sometimes provides appropriate contexts for arousing children's capacity for empathy and altruism. This can be done by telling the individual children something like, "You know how it feels to wait for a turn for a long time." The basic principle here is to appeal to a resisting child's capacity for generosity and good sense. If this strategy fails, the teacher must intercede after a suitable waiting period by offering, without rancor, a simple explanation such as, "I think Robin has waited long enough." The explanation can be followed with a friendly chat about other activities the child might find of interest. This will prevent such incidents from becoming the major content of a resisting child's relationship with the teacher.

***Negotiating Skills.*** Many aspects of social interaction involve negotiation among participants as to the sequence, structure, and general give-and-take of the interaction. Successful negotiation involves being able to guess fairly accurately what will appeal to another child and being able to make a deal in which each participant's preferences or needs are considered (Rubin & Everett, 1982). Kurdek and Krile (1982) found that sociometric status - which indicates how well individuals are liked by their peers - is related to skill in developing compromises.

Many children benefit from help in developing skills for negotiating and compromising. For children making progress in social participation, the teacher can discuss with them their ideas about possible compromises. However, in the case of inexperienced or hesitant children, the teacher can offer phrases for the children to use and can suggest some bargains that could be struck. For example, the teacher could suggest to one child that he or she say to another child, "I'll pull you in the wagon if you push me on the swing after."

***Suggested Reasons for Assertions.*** Studies indicate that well-liked children are more able than their less well-liked peers to reduce tension in play by offering reasons for their insistence on their points of view (Gottman, 1983). Sometimes a teacher can help by suggesting reasons children might give for their stance in a conflict. In research comparing popular children with unpopular children, the former used a softened form of rejection when resisting the efforts of another child to play or direct the activity. Hazen, Black, and Fleming-Johnson (1982) found the popular children tactfully rejected their peers' requests and demands. Such a rejection might be expressed with words like, "I can't play right now 'cause I already started this game, but maybe later, OK?" A squabble about who is to play the role of waitress might be diffused when one of the children insists that she has to be the waitress "Because my mommy is one!"

***Help for Bullies.*** Even in the preschool period, some children are capable of making their peers do things against their will or preventing them from exercising their will. Boys who manifest this pattern are usually labeled "bullies", while girls are described as "bossy". A teacher has to be concerned about both the bully and the bossy child and those whose failure to resist may cause them to become easy targets for such aggression.

While bullies appear to be strong and to get what they want from their social situation, they may nevertheless feel unlikable and suffer from low self-esteem. Children who are persistently aggressive are usually a problem to themselves and to others. This behavior pattern is highly correlated with low sociometric standing among peers, is the most stable over time, and is the most predictive of later life difficulties (Parker & Asher, 1987). Coie and Dodge (1983) found the most highly stable behavioral traits among children who were described by their peers as "disruptive" and "starts fights". Children rejected for these behaviors seldom outgrow them on their own.

Children who are chronically aggressive or who bully other children should be distinguished from those who are appropriately assertive in defending their rights or who engage in a certain amount of rough and tumble play. In addition, a transitory period of more pronounced aggressiveness may be a step towards maturity on the part of a child who has passively yielded to others' assertions or has habitually withdrawn to adult protection (Maccoby, 1980). Because aggression carries a high cost, it is usually discarded in favor of mature techniques.

But aggression sometimes carries short-term benefits and is not always discarded. In one study, Maccoby (1980) noted that three quarters of aggressive acts by one preschool child against another met with positive consequences for the aggressors; that is, the aggressor got what he or she wanted. Furthermore, when bullies succeeded in getting what they wanted, the chances of their using the same method in the future increased. Children who continue to use aggression as a tool and fail to adopt more mature techniques within a short period need help in breaking a potentially dangerous cycle. Some children may be motivated to change their behavior if they are helped to understand the connection between their low social status and their aggressiveness. Others require direct teacher intervention in curbing their aggressive impulses and in understanding how their behavior affects others.

Most children probably benefit at one time or another from help in handling a bully. Some children, however, have particular difficulty in standing up to bullies. Dodge and Coie (1989) suggest that there is increasing awareness of the role of the victim in a bully-victim relationship. Preliminary research suggests that the bully is not randomly aggressive toward other children, but frequently has favorite victims.

Teachers often attempt to modify bullying behavior by asking the bully questions like, "How would you like someone to do X to you?" Questions of that nature ask young children to be more analytical and reflective than they are likely to be able to be. Such questions usually yield a statement like, "I don't care", or some other noncommittal response. We recommend a twofold approach. The first part of the strategy is to teach children who are being victimized by bullies how to respond to their demands gracefully. If victims respond pugnaciously, they will surely fail, because bullies are usually good at getting their way. Counteraggression sanctions bullies' use of their preferred and well-practised style of interaction. Teachers can suggest to potential victims that they can resist calmly.

Second, when appropriate to the competence of individuals in the incident, the teacher can suggest that they let bullies or bossy children know how they feel about them. For potential victims who are less articulate, the teacher can offer a phrase to use, and she can model the graceful but assertive tone in which to use it. Thus the teacher could say to a child protesting being pushed by a bully, "Say to Robin, 'I don't like to be pushed!'" The tone should not hint at the temptation adults often have to just give the bully what he deserves! The teacher should also explain to the bully how the victim feels. These explanations should not imply that the teacher rejects the bully or bossy child. If this twofold strategy fails to diminish the bossy or bullying behavior, the teacher must step in more firmly to reduce it as it unfolds.

***Pairing Children.*** In some cases, it is useful to pair a less well-liked child with a more popular (but not the most popular) child when the children are to undertake a particular task. Such pairings should be made firmly, not sentimentally, and without any hint to the more popular child that he or she is being a martyr and deserves a medal. If the more popular child protests the assignment, it is a good idea to accept the protest matter-of-factly, but insist firmly and without fuss that the assignment be carried out expeditiously. The teacher's insistence conveys to the children involved, and possibly to those observing from the sidelines, that she expects children to work together even if they are not best friends and that children do not necessarily have to like each other to work together.

***Tattling.*** From time to time, a teacher is confronted with a child who seeks attention through tattling or telling tales about other children. Instead of accepting and acting on the information offered, the teacher can send the child back to the situation and ask him or her to remind the others about the rules. Again, this suggestion is best made in a matter-of-fact tone.

In an unpublished pilot study with kindergarten children, McClellan (1989) found that tattling correlated moderately with aggression. Anecdotal evidence indicated that children who tattled about one another tended to respond aggressively to conflict and to tell tales about others at higher than average rates. Both tendencies might be related to ineffective strategies for dealing with conflict. But in some cases, telling tales is related to high needs for adult attention or approval.

By the time children are seven or eight years old, teachers can help them understand when they should inform the teacher that another's behavior is endangering persons or property. During the preschool and kindergarten years, children are not yet able to recognize such instances, and adults must accept responsibility for monitoring where the children are and the potential risks of the situations they are in.

### Summary

Various strategies have been outlined. Some of them address the range of general social difficulties that teachers of young children inevitably encounter, and others address specific difficulties. As far as we know, nothing works for all children, and all of the strategies we have recommended can be overdone! Many children with social difficulties require more specialized help than the teacher can provide. However, we know from our own experience and the experiences of many of our students who teach young children that spending a little time alone with a child - perhaps ten minutes a day for a week or two - can often help the child make a big step in a positive direction. The time spent alone with the teacher, doing something simple and pleasurable, often reassures individual children that the teacher really cares about them. Time alone is not only valuable for the child; it can also help a teacher to focus on the child's positive attributes.

## IV. Provision of Worthwhile Activities

Some activities are more conducive to peer interaction than others. The way teachers plan and arrange the environment and play activities influences children's opportunities to acquire and practise social skills. Many of the behavior problems dealt with by sending a child to the thinking chair, for example, may be - at least in part - due to an inadequate classroom organization or a curriculum that is unresponsive to the developmental level and needs of the particular child. Structural concerns that might influence the social life of the classroom group include the class size, the kind of space used, the variety and types of equipment available, the schedule of activities, teacher-child ratios, the age range of the children, and the content of the curriculum (see Katz, Evangelou, & Hartman, 1990). Informal activities such as spontaneous dramatic play and group project work (Katz & Chard, 1989), in which children explore and investigate a topic of real interest to them, build and make things together, and report their work to each other, can provide important contexts for peer interaction and genuine cooperation. The following discussion examines some of the aspects of classroom provision that facilitate positive social development in the classroom.

### Balancing Individual and Group Activities

For the most part, children acquire and strengthen their social understanding and skills in the context of engaging in worthwhile activities with each other. The principle implied by this is that an early childhood curriculum should strive to achieve a balance between activities designed for individual effort and those requiring or inviting group cooperative efforts. It appears that most early childhood programs overemphasize individual effort and products at the expense of activities in which cooperation is essential. Activities and tasks in which interaction makes a real difference to what is planned, experienced, and accomplished should be given as much attention as those designed for solitary activity. In the early years, the time allocated to various kinds of activities should be balanced so that opportunities for cooperative and spontaneous interaction and dramatic play are available on a daily basis.

**Curriculum Approaches**

Sometimes changes in the structure and content of the program have a greater impact on group and individual social behavior than does direct intervention in an individual's behavior. Although there is some evidence on the relationship between curriculum approaches and social outcomes, it is not abundant. Bruner (1986) found that children who participated in some sort of high-level intellectual activity at some time during the day increased the richness and complexity of their spontaneous play.

A recent study indicates that classroom structures and procedures can have enduring personal and societal consequences. In a longitudinal study of the Perry Preschool Project, conducted by Schweinhart, Weikart, and Larner (1986), the long-term effects of three preschool programs on children from low-income families were examined. Although different in other respects, two of the preschool programs emphasized helping children develop positive social skills and provided a relatively informal context in which opportunities for social interaction were plentiful. In the third program, which was formal, teacher-directed, rapid-fire, and drill-based, the child's acquisition of social skills was not an articulated goal or value.

When youths who had attended one of the three programs were compared at age 15, little difference in I.Q. or academic achievement was found. These youths significantly exceeded members of the control group in I.Q. and achievement in school. However, unlike the first two approaches, the direct instruction curriculum model appeared to be less effective in mitigating damaging effects of the low-income environment on children's social adjustment. In terms of frequency of delinquent acts, children who had been in classes using direct instruction were more like children with no preschool experience. They engaged in twice as many delinquent acts as did members of the other two groups. These acts included five times as many acts of property violence. Children from the direct instruction group engaged in the same levels of drug abuse and reported the same poor family relations, low participation in sports, and low expectations for educational attainment as did children with no preschool experience.

Another difference between the program types involves children's opportunity for control in their choice of activity. Both the Perry Preschool and the traditional preschool consistently offered children opportunities to be self-directed in their choice of activity, while the activities were mostly teacher-directed in the direct instruction approach.

Haskins (1985) found that preschoolers who had been in a formal academic program showed increased levels of aggression in elementary school. Children in the control group, who attended a traditional preschool program, showed significantly less aggression. These findings are consistent with other research (see Johnson, Johnson, Holubec, & Roy, 1984) that suggests a positive relationship between indicators of psychological health and educational models that encourage social interaction and development in students. The findings are significant because they underscore the importance of providing adequate opportunity for children to socialize and learn from one another in informal contexts.

Children who learn that they have the capacity and opportunity to exert control over their actions early in life may come to take responsibility for their own actions. Katz and Chard (1989) have suggested that an optimum rather than a minimum or maximum amount of informality in the classroom be sought. A program has maximum informality when it has few routines, little adult input and guidance, and when it rarely includes group projects. Minimum informality occurs when a program imposes on the children many rules and routines and a great deal of adult direction and little opportunity for children to make decisions or choices. Thus one of the most important elements in encouraging healthy social development in children is the teacher's provision of an environment conducive to socialization by providing ample time for children to socialize with one another and to make choices and decisions about their play and work with guidance to facilitate productive, satisfying, and interesting experiences.

Piaget (Kamii, 1973) emphasized the importance of peers in children's social and cognitive development. It is with peers that the child must confront the beliefs of those who see things differently. By hearing different ideas and having their ideas challenged, children begin to reexamine them. Social interaction with peers is, in Piaget's view, a natural source of paradox or disequilibrium, which stimulates social and cognitive growth. If this is the case, then one could predict that children who do not experience a "normal amount of peer interaction consistently over a number of years may evidence deficits in social cognitive development" (Rubin, 1983).

## Types of Materials and Activities

Some kinds of equipment, toys, and materials elicit considerably more complex social interaction among children than do others. Sociodramatic play, house play, doll play, and play with blocks and trucks are more likely to elicit peer interaction than play with puzzles, easels, paper, and clay.

Connolly and Doyle (1983) found that children who engaged in frequent and complex fantasy play with peers were more popular and demonstrated greater social skill than did others. But it is difficult to know which comes first - play experience or social skills. Researchers have also found that fantasy or pretend play is more positive, sustained, and group-oriented than is nonfantasy play. Pretend play may be the activity where preschool children have the greatest opportunity to practise social skills in a content area that is highly engaging. Successful social pretend play requires the use of considerable skill because the child must integrate two or more viewpoints - his or her own and those of other children - in a way that is acceptable and meaningful to all and is consistent with the story line being enacted.

It may be that for children of this age, fantasy play provides a significant framework for the practice and refinement of social skill. Children who have skill in this area may thus have greater opportunity than others to practise the cognitive and affective dimensions involved in social competence. Put in another way, pretend or fantasy play can be viewed not only as a context of interest to preschoolers, but also as a skill in its own right, the development of which may give preschool children a greater sense of play competence and may make them more attractive play partners.

Because play is such a dominant feature of the preschool years and because social interaction is such a dominant feature of play, it is reasonable to assume that the preschool years constitute a period in which children are particularly sensitive to the development of social competence. If this is so, lack of opportunity for children to interact socially in play during the early years may have a more deleterious effect than does lack of opportunity for play at a later stage.

## Conclusion

Human beings spend most of their lives in the company of others. The foundations of the capacity to function effectively in social contexts are laid during the early years. The evidence suggests that the best time to help children with this major developmental challenge is during the first half-dozen years of life. Once young children begin to spend large proportions of their time in group settings, adults have a unique opportunity to contribute to the processes of building a solid foundation for the children's social learning.

We suggest that social development be included in the assessments of individual children's growth and learning throughout the early years. We also suggest that evaluations of the effectiveness and appropriateness of early childhood programs include observing the extent to which opportunities for social interaction are available and appropriate teaching strategies are used. Evaluations should also address the impact of the curriculum model and materials used on children's social development.

One of the main themes throughout this discussion is the importance of teachers speaking to children - even young ones - as people with minds. We urge the use of warm, direct, matter-of-fact, and straightforward speech with children. It is unnecessary to be sentimental at one extreme, or grim and somber at the other. We realize that everything we have suggested can be overdone and that some suggestions contradict others in certain ways. But there are no simple, easily applied formulas that solve the complexities involved in teaching young children. Nevertheless, we are persuaded by the evidence, our experiences, and the experiences of many colleagues that the early years are a propitious time to help children establish a firm foundation in social relationships.

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# BOFFINS IN EARLY CHILDHOOD SERVICES

Keynote address

Fifth Early Childhood Convention
Dunedin, 8-12 September, 1991

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Nga mihi nui ki a koutou i tenei ra. E nga tangata whenua, tena koutou; e nga manuhiri ki Aotearoa, nau mai, haere mai; e nga tauiwi o nga hau e wha, tena koutou. Tena ra tatou katoa.

One of the delights of working in the field of early childhood education is that it is so diverse that many disciplines connect with issues in the field. I want to indulge my delight by playing with some fragments of knowledge, from a number of settings I move amongst, in a Boffin-like fashion; gather them together in order to analyse where we seem to be in early childhood education in Aotearoa, New Zealand.

Gwen Gawith, an inspired New Zealand educator, wrote a book for students, called Power Learning, (1991). In it, she describes four categories of learner: The Boffin, The Butler, The Builder, and The Baker.

It is The Boffin who caught my eye.

Boffins, Gawith says, "delight in unrelated fragments of knowledge for knowledge's sake; interesting things happen when Boffins learn to put these fragments into a framework and analyse them," (Ibid, p. 9).

I propose to play with some fragments this morning and then try my hand at some connected knowing - to pick up the concept used by Anne Smith last night.

## Bronfenbrenner

The first fragment is the connection Urie Brofenbrenner made between public policies and children's development. Brofenbrenner, at the second Early Childhood Convention in 1979, brought to us his theory of The Ecology of Human Development. It is based on a vast amount of data on the conditions that foster the optimal development of children. Bronfenbrenner boiled all the data down to two essential propositions.

1. "In order to develop normally, a child needs the enduring irrational involvement of one or more adults in care and joint activity with the child;

   and

2. "[This] (the involvement of one or more adults in joint activity with the child) requires public policies and practices that provide opportunity, status, resources, encouragement, stability, example, and above all, time for parenthood, primarily by parents, but also by other adults, ... both inside and outside the home."

When speaking in New Zealand, Bronfenbrenner used the image of the Russian doll to powerful effect. He reminded us that parent and child dyads need at least one other support person - a third Russian doll - to enable them to function effectively. Even that is not enough, however. "Three-person systems also demand certain conditions for their survival and to function best," (Ibid). This is where the other Russian dolls have an influence. They represent informal social networks, and organisations (such as early childhood services), which care for children. All of these are affected by conditions resulting from social and economic policies, which may damage or support the child and those closest to her.

This leads me to ask the question: do we have such social and economic policies? It would be fair to say that New Zealand was making good progress towards *social* policies that were supportive of young families in the late 1980s. They included income policies such as Family Support, greater assistance with health care costs, the extension of the Special Education Service to preschoolers with disabilities and improved policies for early childhood education.

But we are also experiencing *economic* policies which have very ugly consequences for those tipped out of the labour market. We have increasingly become a divided society. Those who are in full-time paid jobs are working far longer hours, as our employing organisations become lean'n'mean. This leaves us with too little time for family and friends. Without *time*, we cannot engage in that important "joint activity with children".

Those who belong to families where no one is in paid employment are likely to be having a hard time surviving. Findings from Glen Elder's research (1974) is worth repeating. He found that one of the most powerful influences affecting the development of adults who were children in the Great Depression was parental unemployment. Children who were then under 10 years of age suffered marked long-term bad effects from their parents' unemployment.

Just what sort of time bomb are we sitting on in New Zealand? With over 10% unemployed and over 25% of Maori unemployed?

It may depend on whether we blame the victims. (Do we?)

It may depend on the level of financial stress that is associated with unemployment. (How are we doing in this respect?)

It may depend on the support systems available to families. (Do we foster community networks?)

Within this context, it my belief that people in early childhood services are making a significant contribution to building communities, and supporting families. Through this you could be improving the long-term survival of children. I shall argue later, you get no recognition for building networks because it is in conflict with the current economic ideology which is premised on individualism.

*Different cultures have distinct blueprints*

This year, another Bronfenbrenner observation has become more vivid for me. It is the second fragment that I want to share. He said,

> Within any culture, or subculture, settings of a given kind tend to be very much alike, whereas between cultures they are distinctly different. It is as if with each ... culture and subculture there existed a blueprint for the organisation of every kind of setting. Furthermore, the blueprint can be changed, ... and produce corresponding changes in behaviour and development." (1979, p.4)

> Within any culture, settings of a given kind tend to be very much alike, whereas between cultures they are distinctly different. It is as if with each ... subculture there existed a blueprint for the organisation of every kind of setting. Furthermore, the blueprint can be changed, ... and produce corresponding changes in behaviour and development." (1979, p.4)

This year, I included in a university course content about early childhood education in other countries in the South Pacific. Studying the provision of preschool education in the Cook Islands and in Western Samoa, I noted that the blueprint for early childhood services dominant in New Zealand was not adopted by our Pacific Island neighbours, despite considerable opportunities for them to learn our methods. For example, there has been little enthusiasm for kindergartens in Western Samoa even though the first kindergarten was established in Western Samoa about 20 years ago. However, a new model for early childhood services has just been shaped by the indigenous people of Western Samoa, and its popularity is growing by the month. I predict that now that the setting and culture are more in harmony, and a blueprint has been established based on Samoan beliefs and values, there will be corresponding changes in the development of Samoan children.

Those who attend the hui in 1981 and shaped the vision for Te Kohanga Reo decided that in order to change the achievement patterns of Maori children a move away from the 'blueprint' for mainstream early childhood settings was required. A new blueprint *was* established. The ensuring positive changes in behaviour and development of Maori children attending nga kohanga reo are now well known.

Less than five years after the first kohanga reo was established, some Pacific Island communities in New Zealand began to devise their blueprints for language groups, such as Aoga Amata.

I believe that Maori and Pacific Islanders' theoretical and practical understanding of ecology of human development outstrips those of many policy makers who are trying to impose uniformity on all early childhood services.

There is one thing, at least, that we can be thankful for in this area: the 1989 decisions to leave the management of early childhood services as they were prior. Imposing something like a board of trustees on kohanga reo and Pacific Island language groups would have been entirely inappropriate. As well, sensitivity was shown in the arrangement whereby Te Kohanga Reo was able to negotiate its own guidelines for charters. But, there has been a stumbling block: the regulations. What chance is there of kohanga reo maintaining their blueprint, (their kaupapa), when they have to conform to standardised minimum standards?

I will return to this question later in my talk. Meanwhile I want to pick up another fragment now which supports the theory and practice of culturally different blueprints for early childhood settings.

## OMEP: ECE to fit indigenous views of childhood and upbringing.

OMEP is a World Organisation for Early Childhood Education. A 1991 paper outlining an OMEP Development Programme says

> The focus on education and care at this age level cannot be separated from the context in which young children are living, (which indicates that all work for young childdren should be conducted in an integrated way, taking into account the cultural, local and personal initiatives and preferences).
>
> ... know[ing] the culture of socialisation and childrearing in the target countries, ... is a precondition for setting up a child care project in line with indigenous conceptions of childhood and upbringing."

Te Kohanga Reo is a world leader in terms of an indigenous people setting up movement which operates in line with their own conceptions of childrearing and whanau development.

This demonstrates the obvious - that those who know each culture of socialisation and childrearing best are those who actually belong to each culture.

In Education to Be More (1988), the Meade committee stated that three elements are at the heart of all early childhood care and education services:

- features which are in *the interests of the child* - that is, good-quality services which meet the rights and needs of the child,
- features which are in *the interests of caregivers*,
- features which are *in the interests of cultural survival and transmission* to succeeding generations.

(Ibid, p.6)

We were quite clear, too, that cultural transmission was *not* just for minority cultures. Early educators put a lot of time into socialisation of children and socialisation is largely cultural transmission by another name.

Talking about the features still, the Meade report continued,

> "It is essential for all three elements to be present in every early childhood care and education arrangement. If any one of the three is championed at the expense of the other two, then the service will be unacceptably inadequate. Achieving the correct balance is crucial."
> (Ibid).

I believe that an indicator that balance exists between the three elements is growth. The growth of Te Kohanga Reo has been at an exponential rate. In 9 years, 616 nga kohanga reo have been established, (Manatu Maori, 1991). Maori leaders recognise also that language and cultural transmission is not the whole story. Te Kohanga Reo is about the empowerment of parents and whanau and the children's learning is a priority. The three features are indeed in balance.

Another fragment now, on a different tack.

## Framework for Quality Assurance: Diversity Please

Irene Balaquer and Helen Penn (1990), from the United Kingdom, make a useful distinction between quality assurance and quality practice.

Quality assurance is mostly the responsibility of government policy makers. Quality practice, on the other hand, is mostly the responsibility of early childhood staff and parents in local centres and home-based schemes.

Generally, quality assurance is created through the mechanisms of regulations and provision of training for early childhood teachers. In New Zealand, we have an additional mechanism - charters. In some other countries, accreditation of early childhood facilities serves a purpose similar to charters.

The literature on good quality childhood education, (eg, Smith & Swain, 1988; Farquhar, 1989; Kagan, 1990), says that a handful of features come through over and again as benefiting children. What we saw with the introduction of the Education (Early Childhood Centres) Regulations, 1990, was government attention given to all those features pin-pointed by research that could be handled by the state. This was encouraging for early educators and reassuring for parents; it showed that the state was concerned for its youngest citizens.

Although some centres had trouble finding resources to meet minimum standards in time, especially when Cabinet imposed a moratorium on discretionary grants for months and months, and although some found one or two requirements to be excessive, few disagreed with the idea of standards to provide assurance. Therefore, the backwards steps announced in the 1991 Budget has raised anxieties.

I have only one major criticism of the regulations as a mechanism to implement quality assurance. In the Education (Early Childhood Centres) Regulations, there is little or no cognisance of the different blueprints needed for the success of early childhood services for children from different cultural backgrounds.

Government is taking note of the fact that different blueprints apply where early childhood education occurs in homes and is developing a Code of Practice for home-based schemes. Why not recognise the different blueprint for Te Kohanga Reo and promulgate a code of practice for them? Obviously, this needs to be devised by Maori. And, by corollary, why not further codes for Pacific Island language groups? The Education Amendment Act (1990) does not limit the number of codes of practice.

Without some diversity in providing for quality assurance, that is in accord with different cultural blueprints, the state is in danger of inhibiting the development of kohanga reo and language groups and, more importantly, the children and adults in them.

> As an aside, I want to comment that there could be another similar threat on the horizon. The Ministry of Education has recently let a contract for the development of national curriculum guidelines for early childhood services.

Margaret Carr and Helen May from Waikato University are working on these guidelines. They have insisted on multiple curricula with different cultural groups in charge of their own.

Why must there be different curricula? Because, in the curricula resides cultural and knowledge, (Meade, 1990a): However, I want to ask, will multiple curricula survive the implementation stage (especially given the unresolved issue of what to do in multicultural settings).

*Devaluing of the charter concept*

I have a major criticism of the devaluing of the charter as a part of the quality assurance model. My criticism is of the Statement of Desirable Objectives and Practices, promulgated on 6 December, 1990, and distributed to early childhood services via the Education Gazette on 14 December (after most centres had finished for the year).

What is the relationship between charters and the Statement of Desirable Objectives and Practices meant to be? In one part of the Gazette notice the Statement is described as the core of charters. (I thought that is what licenses and codes of practice are?) In the next sentence, the Statement is described as a framework. Confused? I am, and so are many others.

The law permits (but does not require) the Minister of Education to gazette a statement of desirable objectives and practices. This option has been adopted. I have several criticisms of what has happened to the charter guidelines in their revised format.

1. Nowhere does the Gazette notice make it clear whether or not Te Kohanga Reo are exempt from these new charter guidelines because their Trust negotiated its own charter guidelines. There are many references in the Statement to *every* chartered early childhood centre.

   Thus, I wonder whether the use of the Trust guidelines varies from district to district, and whether some liaison officers are taking the Statement into kohanga instead of the Trust charter guidelines?

2. There is an increase of central control over the content of the charters. The Early Childhood Management Handbook had a mix of requirements and things that management had to plan towards. Now, there are over 60 objectives and practices listed in the Statement. They are deemed part of charters. Thus far more of the charters are prescribed by government. Why wasn't the former division of requirements and plans retained so that centre planning and 'ownership' could continue?

   Listen to the language in the Introduction to the Statement of Desirable Objectives and Practices for Chartered Early Childhood Services:

   "These objectives and practices are deemed to be part of the charter of every chartered early childhood centre ... and are to apply to the management and staff of every chartered early childhood service ... [my emphasis]

   "The way in which these objectives and practices are to be met, together with any other objectives and practices particular to an early childhood service which do not run counter to the objectives and practices as set out in this statement, shall be set out in the charters of each early childhood service."

The objectives in the Statement are often more like content prescriptions than developmental principles and strategies. The word 'plan', a key word in the Management Handbook indicating a developmental approach, is far less evident.

3. It is difficult to tell how much the requirements themselves have, in fact, changed between the Management Handbook version and the Statement of Desirable Objectives and Practices. We are told "the modifications are minimal and do not alter the substance of the original requirements". However, changes in substance have been uncovered by many people: for example, the section regarding the Treaty of Waitangi. Centres and liaison officers are finding it challenging to work out whether a charter written under the old guidelines conforms to the new.

4. Charters were submitted in mid-1990. Awareness of the Statement did not seem to surface until about Easter this year, and even then centres were not adequately advised that its existence meant revisiting their charter. This has meant inadequate opportunity for revisions to be worked on by all concerned: parents, staff and management.

The *process* of charter writing was to be and has often been the enormous strength of charters. Now, however, people's reactions are that charters are a bureaucratic nuisance, rather than a constructive tool for growth and development.

I also have a major criticism of the way the Statement of Desirable Objectives and Practices has been introduced. Not only has there been too little time for revision but local partnership has been disregarded. I have heard many examples where liaison officers have gone in with a Statement and said to centre *staff*, "Don't worry about your charter, just sign that you will do what it says here." The parent-staff-management partnership is being ignored.

The 'sign here' approach makes me angry. Research (Meade, 1985; Smith & Swain, 1988) shows that staff goals strongly influence child outcomes. The staff will not 'own' the Statement's objectives unless given the chance to work through them. Moreover, they may stop reflecting on goals and objectives, because there are now over 60 objectives given to them by the government. Who would want to create more of their own? This takes me back to my earlier confusion about the Statement being a core or a framework (the skin). The picture that is emerging is that it is the whole 'apple'!

The charter development process was significant in the lives of centres in 1990, in building closer relationships between staff, parents and management, and in order to clarify centre goals and objectives. Where parents and staff have *worked together*, outcomes are more significant for children and other family members, (eg, Consortium, 1979, Athey, 1990). The 'sign here' exponents discount (even nullify) the significance all that hard, but good constructive work. Such officers are operating from a separate-knowledge model, whereas many centres now have connected-knowledge and want to make sure that everyone stays connected, (Smith, 1991).

If handling of the Statement has come to the point of officals saying "Don't worry about your charter ...", why have not decision-makers seen that the Statement has become a Juggernaut and the Statement is a major problem?

Does this picture indicate that the decision-makers have reflected on their policy sufficiently? Did they know why they made the changes? Did they consider how liaison officers were to implement it? Did they consider the later review process? I believe not.

My personal view is that the structure in the Management Handbook should have been retained with only minimal requirements deemed part of charters. The majority of charters should comprise centre or scheme plans so that early childhood services have plenty of opportunity to add their own "stamp".

I think the confusion that I have described above demonstrates that our policy makers need to pay more attention to 'know-why', the theory of policy practice. In the next fragment, I want to make the case for early childhood professionals also having 'know-why' as well as 'know how', (Athey, 1990).

### Framework for Quality Programmes: know how, and know why

I want now to challenge early childhood staff. I want to ask you whether you are regularly conscious of the 'know why' of your actions as well as of the 'know how'? Many of you have heard me on other occasions make a plea for 'adult-erated play'. When you get involved in children's play, however, you need to know *why* you are there. 'Know-why' needs to be based on study and on reflection according to Chris Athey (1980).

The truth of this was born out in Nancy Bell's recent research (1989). She found that less qualified staff used their own personal childhood experiences rather than professional understanding as their guidelines where analysis and evaluation was not ongoing.

I believe that we are weak on extending young children's thinking in New Zealand early childhood centres. Last week in Wellington, Lilian Katz treated us to an inspiring slide show from her recent trips to preschools in Reggio Emilia in Italy. The depth and extent of those Italian children's thinking evident in their art was amazing.

We seem to have a real 'kiwi cringe' in this country about aiming and taking action to enhance the cognitive development in preschoolers. Why? I think part of the explanation is that we have been influenced by educational leaders such as Susan Issacs and Gwen Somerset to back away from 'teach and test' approaches to education. It is *good* that we have never adopted the psychometric 'teach and test' approach, nor been obsessive about IQ gains. However, in avoiding IQs, have we overlooked the importance of skilfully handling children's growth in cognition? I think we have. As well, we seem to have thrown out all evaluation, perhaps for similar reasons.

I would argue that we need to develop or reconsider our conceptual frameworks about what good early childhood is. If we are to 'know-why' early childhood education is good, then we must undertake more assessment, but the assessment needs to focus on the effectiveness of programmes.

This year, NAEYC has published "Guidelines for Appropriate Curriculum Content and Assessment in Programs Serving Children Ages 3 Through 8" (1991). These guidelines do not emphasize assessment of children; rather they emphasize evaluating how well a programme is meetings its goals. This does not mean that children are not considered, but, rather, where they are assessed, it is for the purposes of planning for their learning and for communicating with parents.

These guidelines merit study in New Zealand, and adaptation to suit our different cultures. The Minister of Education has a strong interest in assessment. Early childhood professionals need to articulate their principles of assessment which will enhance early childhood education in this country. Otherwise we may be hoist with inappropriate approaches. As well, given the propositions I advanced earlier that different cultures have distinctive blueprints for early childhood services, it is important that we accept *that different cultural groups* will develop their own ways of assessing their programmes.

## In the Present and for the Future

Lilian Katz is more eloquent than I in saying it is easy to get children to do all manner of things and that they can do many things, but should they?

When we were working on the Meade report, I became exasperated at the number of times decision-makers wanted to know what were the long-term benefits of early childhood education, without showing a similar level of interest in the here-and-now benefits. I think that parents and staff assess early childhood services in terms of *present* as well as future value. It is those who are interested in economic outcomes who concentrate most on future values.

How often have *you* asked yourself whether your actions are in the best *interests* of the child in the present *and* for the future? Asking both parts of the question *must* be integral to a 'know-why' approach at the local level for quality programmes.

It is time for me to start correcting some fragments together, like a Bofffin. Bronfenbrenner and OMEP advised us on culturally appropriate diverse blueprints. I have argued that to do so needs diverse Frameworks for quality assurnace and diverse Frameworks for quality programmes. I believe the interests of children In the present and for the future have not been served by the Statement of Desirable Objectives and Practices being steam-rollered over the top of charters collectively devised by staff, parents and managers. It *could* mean the death-knell of different blueprints for different cultures unless minority cultures stay away from bulk funding and charters. It will certainly mean the death-knell of different blueprints for different cultures if national curriculum guidelines (in process) comprise one set of guidelines only *and* they are deemed part of charters. Early childhood curricula are about socialisation, and socialisation is about transmission of culture. Given the awful tale of what happened to charter guidelines when they became part of the legal framework, my plea is that early childhood curricula never became part of objectives and practices.

## New Right Ideology

I have been asking myself why so much attention was focussed on early childhood education in the 1991 round of reviews - four review teams out of a total of 17/18 reviews in the education system were concerned with facets of early childhood provisions. This too has stimulated me to be like a Boffin, and try and learn by putting some fragments into an analytic framework.

If you have read Harvey McQueen's The Ninth Floor (1991) - a personal story by Prime Minister Lange's education speech writer - you will find that early childhood funding was a really contentious issue between David Lange and Roger Douglas. Spending on early childhood education was certainly not favoured by Finance Minister Douglas, even though the magnitude of the increases being considered was only raising expenditure from 2% of Vote Education to 3.5% of Vote Education - a $86M increase in a full year from a Vote which totals about $4 billion.

What seems to be happening in 1991 is a re-run of earlier ideological struggles, with early childhood education as the 'meat in the sandwich'. Early childhood education was, and is again, an arena where ideological conflict is being worked out. The significant aspect of the struggle is indicated by Minister Shipley being reported earlier this year as considering re-introductioning the care and education separation.

Michael Apple (1989) talks about an ideological shift in common sense that is currently occurring where the New Right is reconstructing our ideas about inequality. He says that sites of struggle are where different groups with distinct political and cultural visions attempt to define what means and ends of society are to be. Early childhood education is a site a struggle. The struggle is between those of us in the field and Treasury and their ilk.

It is clear to those of us in the early childhood sector that women and Maori formed a coalition in the 1980s for the advancement of children, women and Maori. That coalition - because of our shared goals and cooperative approach got a foot in the door and managed to obtain some very advantageous decisions for early childhood education from the Fourth Labour Government, (Meade, 1990b). This was no mean feat given the unequal position of young children, women and Maori.

Part of the recurring struggle seems to be because the New Right are trying to move away from a people-oriented focus.

Treasury criticisms that the early childhood policies are too economically expensive are a load of rubbish given the relatively tiny proportion of the Vote spent on early childhood education. Sweden spends 2.0% of GNP on childcare - the same proportion as it spends on Defence!

Could it be that the gains made by early childhood education are too ideologically 'expensive'? The New Right assert that people are only motivated by self-interest to gain wealth, status and/or power. People involved in early childhood organisations demonstrate that they are motivated to do hundreds of hours of work for children (often not their own) for minimal status and power and no wealth. In other words, altruism exists.

The New Right assert that services are only really effective when individual choice is maximised. Maori involved in Te Kohanga Reo demonstrate that whanau collective action produces really effective services.

The New Right assert that equity principles are in conflict with excellence in the classroom. Early childhood teachers demonstrate that child-centred developmentally appropriate programmes (where individual all-round development is pursued at the same time as a curriculum for the group) can combine equity and excellence.

The New Right assert that competition is the way to improve quality. Early childhood organisations have demonstrated that cooperation and collective action have brought about the changes known to be associated with quality early education.

In other words, early childhood educators demonstrate the falseness of many (most) claims made by the New Right. We get no thanks for our collective success - only reviews and more reviews.

Michael Apple (Ibid) distinguishes between 'property rights' and 'people rights'. He suggests that when the conflicts between groups are intense, those interested in property rights (usually the dominant groups) are claiming restoration or expansion of their perogatives. Does this ring a bell? I detect a number of examples of this push in the Statement of Desirable Objectives and Practices, in the Employment Contracts Act, and in the Budget decisions which reduce quality, and reduce infant places in childcare, with concommitant effects on women. 'People rights' in early childhood education are being chipped away.

My question is: could it be that dominant groups fear that the Before Five policies have advanced the perogative of women too far? The signs are there that early childhood services have encroached into dominant groups' power domains, and those groups don't like it.

When early childhood people have acted like Boffins and put their fragment together into a shared framework, we have been able to make good progress towards quality early childhood education that works for children in the present and for the future. When New Zealand early childhood organisations developed a shared agenda, they were able lead the Western world in doing away with the damaging care/education dichotomy. When Maori developed a shared framework, they led the world in providing their own distinctive blueprint, Te Kohanga Reo, that fits their aspirations for Maori children.

Currently we are being tempted to consider competition. Tenders are called for some of the Early Childhood Development Unit's work. This is very worrying. I believe that the path of competition leads towards inequality and to the loss of attention to the distinctive needs of Maori and other ethnic and cultural groups. We have recently attained a much more equitable system. If we collude in moves to divide us, we will have to take responsibility for backwards steps. We must continue to work together within a framework which is in the interests of children, of caregivers and the maintenance of a caring society.

If I am right that we are very threatening to those who have traditionally been the dominant groups, there will be further attacks on the sector. The future attacks may be on:

- quality early childhood education for children,
- early childhood education assisting women furthering their qualifications as part of a positive labour market policy,
- women using early childhood services to participate more fully in New Zealand society and,
- those who are offer alternative blueprints for early childhood services to maintain their culture and language.

We must continue our seeming-irrational collective involvement to counteract New Right public policies and practices. The proven value of our cooperative action based on shared goals and understanding is what is provoking the attack. We know why we were successful. Let's go on proving the value standing together. Ignore the calls for competion and act with solidarity.

This brings me back to the whakatauki of early childhood conventions:

"Kahikatea tu i te uru."

Alone and isolated kahikatea can be uprooted. With their roots interwined together they grow to be forest giants. Let us become giants in this increasingly hostile world. Let us join together on the ground *and* allow growth in diverse ways above the ground.

No reira, tena koutou katoa.

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# ANAU AKO PASIFIKA PROJECT: PACIFIC ISLAND EARLY CHILDHOOD EDUCATION PROJECT

Teupoko Morgan, Field Director

Tena Koutou, Nga Uri a o koutou matua tupuna o Kaitahu.

Tena koutou, Nga Uri o te Waka o Takitimu, Kurahaupo, me a tatau nei waka katoa.

Tena koutou, Nga Matua o koutou i hikoi nei i runga i te mata o tenei whenua

Ko koutou o ratou Ahi Ka
E tupu nei, e whakaaro hia nei kia ratou -
    No reira, tena koutou, tena koutou,
    tena koutou!

Talofa lava. Fakalofa lahi atu. Kia orana. Malo e lelei. Ni Sabula. Talhoa Ni. Ia Orana. Greetings in the seven languages of the seven island groups from the Pacific: Samoa, Niue, Tahiti, the Cook Islands, Tonga, Fiji and the Tokelau Islands.

The Anau Ako Pasifika Project is a home-based programme in early childhood care and education for Pacific Islands communities. The programme provided another option in early childhood education for Pacific Islands families in the three areas where it operated: Auckland, Tokoroa and Wellington. The programme, funded by the Bernard van Leer Foundation, completed three years of operation on 31 March 1991.

## Historical Background

The Anau Ako Pasifika project was developed in collaboration with the Bernard van Leer Foundation, an international philanthropic institution based in the Hague, in the Netherlands. The development of the project involved the former Department of Education, the Pacific Islands Polynesian Education Foundation (PIPEF) and the Pacific Women's Council (PACIFICA).

The Bernard van Leer Foundation concentrates on the development and support of informal, low-cost, community-based projects in early childcare and education for socially disadvantaged children from birth to eight years of age.

The seeds for the New Zealand project were sown in December 1985 when Mr Jim Ross, the then Assistant Director-General of Education, visited the Foundation. He met Dr Freddie Wood, Director of Programmes, and other officers of the Foundation at the Hague, and proposed during discussions that Pacific Islands people living in New Zealand could be considered by the Foundation as groups requiring assistance under their programme.

The following year, preliminary discussions were held in New Zealand between PIPEF, PACIFICA and the then Department of Education. The directors of three divisions of the then Department - Maori and Pacific Islands Education, Research and Statistics, and Early Childhood Education - decided to take on the formation of a proposal to meet some of the needs of the Pacific Islands children in New Zealand.

A group of four people representing these three divisions in the Department was formed to prepare and present a proposal to the Bernard van Leer Foundation. Dr Freddie Wood visited New Zealand and assisted the group to finalise the structure and form of the proposal.

"Anau Ako Pasifika" is a composite of several Pacific Islands languages and was put forward by members of PIPEF and PACIFICA to provide a title for the project which was clearly identifiable as being Pacific Islands. The word "Anau" is a Cook Island word for family, "Ako" is a Niuean, Tongan and Samoan word which means focus on learning, and "Pasifika" means the Pacific Islands way.

## Why an Early Childhood Education Programme?

Early childhood education was identified as the appropriate focus for an intervention programme to ameliorate and remove educational and social disadvantages. It has been well documented in educational and psychological research literature that children's experiences during the earliest years of life are probably more critical for satisfactory adult development than those of any other period.

The basis for this dialogue is laid during the preschool years when language is developing rapidly and young children are in the care of adults who know and respond to their uniqueness and who converse with them frequently.

At the time of writing the original project proposal, enrolments of Pacific Islands children in early childhood institutions were low; among four year olds, less than 50 per cent of Pacific Islands children in New Zealand compared to 60 per cent for Maori and 85 per cent for European (Pakeha) were enrolled in a recognised early childhood education programme. Furthermore, for Pacific Islands children, enrolments in the main early childhood institutions (Kindergarten and Playcentre) were not increasing, but have decreased.

## Objectives

The following specific objectives were established for the programme:

1. To develop a home-based intervention to alleviate educational and social disadvantages faced by Pacific Islands children, the programme to be developed in full consultation with and be acceptable to the respective Pacific Islands communities (the primary focus for the Bernard van Leer Foundation contribution to the project).
2. To strengthen existing Pacific Islands language nests/community early childhood centres and facilitate the establishment of new centres (the primary focus for the Department of Education contribution to the project).
3. To include, as an essential element of the project, a training programme for mothers, the tutors serving the home-based programme and the teachers/supervisors working the existing language nests/community early childhood centres.
4. To foster improved health practices and nutrition.
5. To encourage the general sharing of parenting skills.
6. To reinforce positive self image and the development of confidence in the children.
7. The positive acceptance of the maintenance of the mother tongue and the development of bilingualism.
8. The positive acceptance of culturally different practices in the educative process.

## Project Administration, Co-ordination and Implementation

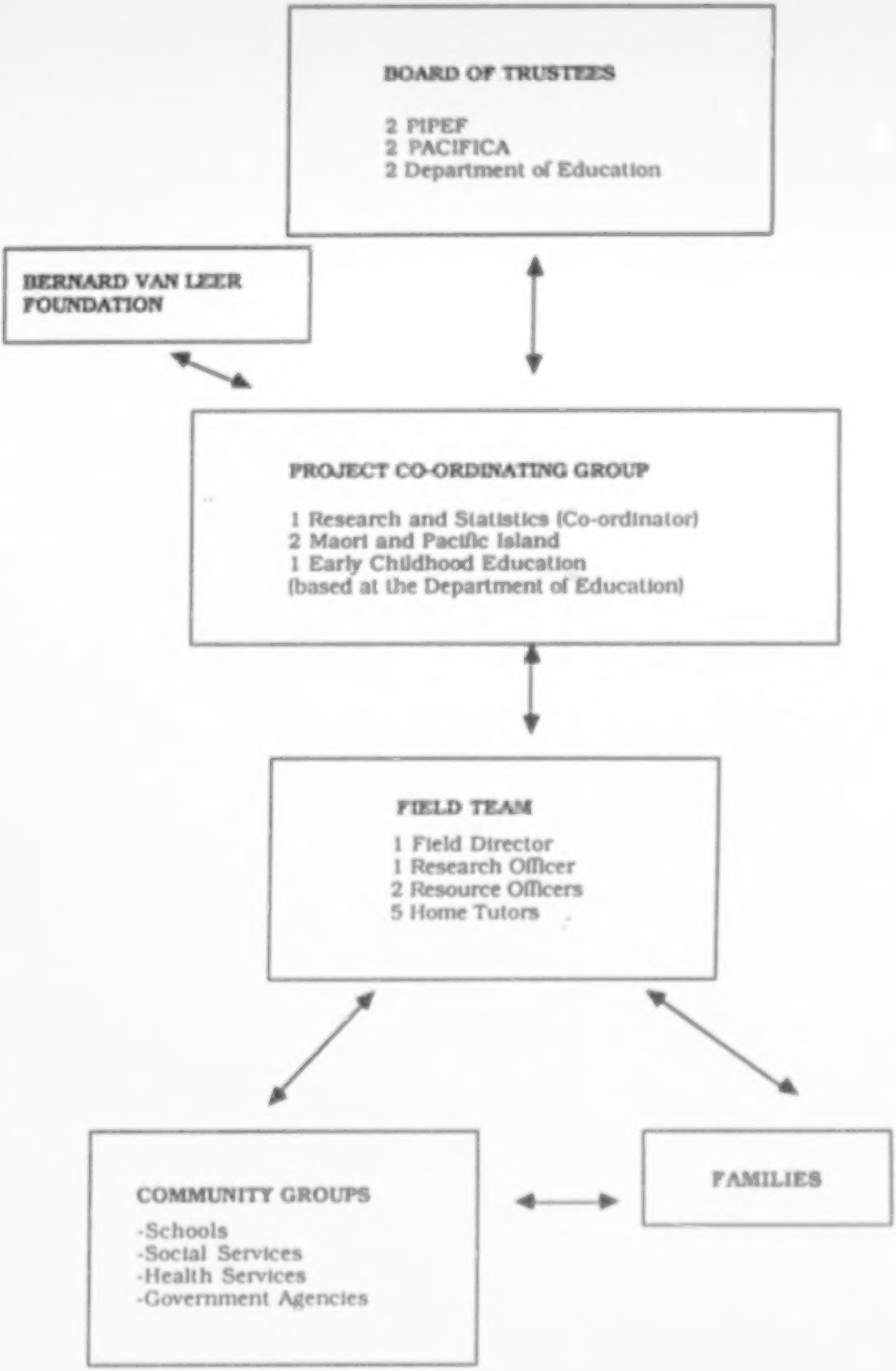
To achieve the objectives established for the project, an administrative structure was set up to administer and implement the programme. This consisted of three main groups: the Anau Ako Pasifika Trust, a Project Co-ordinating Group and the Field Team.

## Anau Ako Pasifika Board of Trustees

A special purpose trust made up of six trustees, two representing each of the Department of Education, PIPEF and PACIFICA, was set up to administer the funds made available by the Bernard van Leer Foundation.

The Board of Trustees has oversight of the project, monitoring the work of the field team to make sure that the funds from the Bernard van Leer Foundation are being used to further the aims of the project as set down in the Deed of Grant.

Figure 1. Project Organisation


BOARD OF TRUSTEES
2 PIPEF
2 PACIFICA
2 Department of Education
BERNARD VAN LEER FOUNDATION
PROJECT CO-ORDINATING GROUP
1 Research and Statistics (Co-ordinator)
2 Maori and Pacific Island
1 Early Childhood Education
(based at the Department of Education)
FIELD TEAM
1 Field Director
1 Research Officer
2 Resource Officers
5 Home Tutors
COMMUNITY GROUPS
-Schools
-Social Services
-Health Services
-Government Agencies
FAMILIES

| Child's Ethnic Origin | LOCATIONS | | | | | Total Number of Children |
|---|---|---|---|---|---|---|
| | Massey | Mt. Roskill | Tokoroa | Newtown | Lower Hutt | |
| Cook Island | 2 | - | 44 | 2 | - | 48 |
| Fiji | 2 | 1 | - | - | - | 3 |
| Niue | - | 60 | - | - | - | 60 |
| Samoa | 33 | 8 | 2 | 19 | - | 62 |
| Tokelau | 2 | - | - | - | 21 | 23 |
| Tonga | - | 5 | 14 | 2 | 3 | 24 |
| Papua | - | 1 | - | - | - | 1 |
| Cook Island/Niue | - | 11 | - | - | - | 11 |
| Cook Island/Tonga | - | 2 | - | - | - | 2 |
| Niue/Samoa | - | 5 | - | 2 | - | 7 |
| Niue/Tonga | - | 4 | - | - | - | 4 |
| Niue/Tokelau | - | - | - | - | 1 | 1 |
| Fiji/Samoa | 1 | - | - | - | - | 1 |
| Samoa/Tonga | - | - | - | 1 | - | 1 |
| Samoa/Tokelau | - | - | - | - | 3 | 3 |
| Tokelau/Maori | - | - | - | - | 3 | 3 |
| Other | 1 | 7 | 3 | - | 5 | 16 |
| **Total** | 41 | 104 | 63 | 26 | 36 | 270 |

Table 2: Ethnic Origin of children in the Home-based Programme.

## Field Team

In line with the original project proposal, ten Pacific Islands women (2 full-time and 8 part-time workers) were employed to implement the home-based programme. Five Pacific Islands ethnic groups were represented in the Field Team: Samoan, Cook Island, Tokelauan, Tongan and Niuean.

At the beginning of the project there was a relatively slow 'setting up' phase, which resulted in the project becoming two-thirds operational in November 1988.

## Monitoring and Evaluation Methods

The 'action research model' provided the theoretical and practical framework for the monitoring and ongoing evaluation of project activities. The research was largely formative and qualitative in emphasis, focusing on the effectiveness of processes and strategies used. However, data for summative evaluation have also been collected. As well, some qualitative data are available to supplement the more qualitative information which has been gathered.

## Baseline Data Questionnaire

The questionnaire was designed to provide information about the following topics:

- strategies and processes used for identifying and making the initial contacts with families who participated in the project;
- factual information about the families, such as ethnicity, number of people in the household;
- safety aspects of the home environment and the availability of physical space for play;
- language(s) used in the home;
- utilisation of ECE centres and other support services such as the Department of Social Welfare, Housing Corporation, public health services, and the public libraries;
- parents' attitudes to languages (the mother tongue and English) and beliefs regarding language learning strategies; and
- parents' beliefs and values with regard to the care and education of young children.

The use of the questionnaires and checklists led to training sessions with the Research Officer. Home Tutors, who were required to collect data and information from the families came into the job with little experience in research.

## Training Courses

Regular training courses were held, emphasising the following.

- to identify and highlight the skills, knowledge and experiences of individual team members to meet the demands of working with families (children, parents, aunties, uncles and grandparents), community groups and government agencies;
- to discuss effective ways and noneffective ways of working with families, language groups and other agencies, through the sharing of experiences and ideas;
- child development - sharing information on the development in early childhood education and particularly the changes affecting Pacific Islands language groups;
- to discuss and evaluate research techniques and procedures;
- to view resources developed by Resource Officers and discuss ways in which they could be used in the homes as well as in group sessions;
- to discuss and establish the place, need and usefulness of evaluation and the research techniques employed for data collection;
- to identify and give tangible support to the needs and concerns of individual members; update and clarify administrative requirements and changes;
- language development and learning strategies;
- choices for children; ensure that children learn to make choices;
- respecting confidentiality of information collected from families;
- the need to give parents confidence in their abilities as parents as well as educators;
- the need to observe children and not to stereotype them;

- the empowerment of parents to have access to the resources needed by their children;
- communicating sensitively with people who may perceive the field team as judgemental and authoritarian;
- time was needed to explore, reflect about the job; the need to get a focus on the project from both a personal and professional viewpoint.

Training courses specifically for Home Tutors and others for Resource Officers were held, to meet the particular demands of their work.

### Home-Based Programme

One of the unique features of the home-based programme was that it was an education programme for the whole family. Home-based in the conventional sense means working with the child and mother or primary caregiver, whereas in Anau Ako Pasifika it is an education programme for the whole family (i.e. extended family). The main focus of this project was the provision of a home-based early childhood education programme. The emphases of the programme run by each of the Home Tutors were many and varied depending on individual families' circumstances. Working in the field revealed that there are many ways of conducting the home-based programme. In general, there were three main steps for Home Tutors to follow in order to provide the home-based programme. First, the Home Tutors needed to identify families likely to benefit from the programme. Second, they needed to establish contact with families and, thirdly, to carry out home visits in order to provide the education programme.

### Languages Used in the Homes

A major objective set out for the Project was the 'maintenance of the mother tongue and the positive acceptance of the development of bilingualism', therefore it was important to collect some data on the language(s) used in the home environment. In addition, information which might reveal some of the important determining factors affecting the maintenance of the mother tongue and the development of languages were collected from families.

Parents in the home-based programme expect their children to:

- maintain the language and culture as a form of self identity;
- be sharing, caring, learn to respect parents and others, particularly older people, and respect other people's properties and the environment;
- have a good education, more specifically to achieve at a higher level than that of the parents, thus enabling them to get a good job;
- have good manners, be obedient, polite, honest, kind and self disciplined;
- learn English to help them understand topics which are taught in schools;
- be helpful in the home and outside of the home;
- be committed to family responsibilities and commitments;
- learn Christian values;
- get along happily with other children and adults; and
- be happy and accept whatever is available at home.

### Links with Language Groups and Other ECE Services

The appointment of Pacific Islands Co-ordinators in late 1989 and in early 1990 provided Pacific Islands communities, particularly language nests, with a much needed focus. Co-ordinating the development and monitoring of the progress of language nests became the responsibility of the Pacific Islands Co-ordinators who provided and continue to provide community workshops on various aspects of early childhood education. The field team has worked together with community groups during workshops initiated by Pacific Islands Coordinators. Anau Ako Pasifika complements the work of language nests in communities.

In October 1990, the Anau Ako Pasifika staff in the Central and Northern Regions (6 members) were invited by the National Manager for Pacific Islands Early Childhood Education (ECDU) to meet with Managers of ECDU and Pacific Islands Co-ordinators. This important link has encouraged and helped the field team to broaden their understanding of wider developments. It, too, has helped to lessen the professional isolation that can occur with field work.

### Anau Ako Pasifika Promotes the Concept of 'Parents as Teachers'

The project facilitates and enables parents and families to add their skills, knowledge and confidence to make responsible choices and to carry them out. This process of empowerment encompasses the child, the parent, the extended family and the community.

As well as home visits, group discussions and workshops are held for the sharing of ideas on resources, appropriate children's play activities but, most of all, to recognise people as important resources. Their cultural knowledge in music, dance and story telling become a focus for 'sharing'.

### Resources

Natural materials which reflect the cultural backgrounds of children are emphasized and are widely used during home visits and group discussions. Natural materials provide learning experiences for Pacific Islands children. There is the development of understanding of early maths concepts as well as increasing oral language ability.

A wide variety of materials are available. Some are mentioned below.
Oval shaped shiny brown 'kaka' seeds
Walnut shaped grey candle nut seeds, 'tuitui'
Circular 'tamanu' seeds, varied sizes/small, flat, brown 'pine' seeds, for collage
Cone shells, variety of sizes
Cowrie shells, varying colours
Cats-eye, circular in form, varying sizes
Dried 'utu' (barringtonia) seeds, sometimes used in place of a ball
Dried miniature gourds, varying sizes, varying textures
Varieties of mixed shells
Clam shells, variety of sizes
Percussion instruments
Large 'patai' bean pods, for music
Coconut shakers
Varieties of coral stones, different patterned textures.

As well as the materials from within the cultures, the varieties of natural materials from the richness of the New Zealand environment are included. Through experimentation, children explore with materials that are familiar. The words of simple chants, lullabies and songs are emphasized and enhanced by the rhythm of seed clicks and 'tokere' rhythms; all part of the ethos of the culture.

There are designs, shapes, patterns, order, texture in the natural materials; children create and recreate and are guided through discussions by the Home Tutor and the mother.

Appropriate resources identified for home-based work kept Resource Officers moving to Resource Centres, factories, and shops for bulk waste materials before turning these into play activities. Visits to playcentres and kindergartens afforded opportunities to observe the wide range of equipment and play materials. Culturally appropriate sets of pictures, cardboard puzzles, varieties of cards, objects which help children's mathematical concepts to develop. Simple alphabet and story books in Pacific Island languages were produced. These were samples which encouraged parents to make their own collection.

Learning for young children in the home-based programme is the result of interaction between the experiences with materials, ideas and the people in the home.

### Characteristics of the Families in the Programme

By 31 March 1991, 192 families (with 270 children between them) had been extensively involved in the home-based programme. A further 84 children moved to language nests after only one or two contacts from the

Home Tutor. In the case of most of these 84 children, parents were either encouraged by the Home Tutor to take their children to language nests or another ECE centre because she was not able to include them in the home-based programme. In some cases, the distance between the Home Tutor's base and the families' homes did not allow the Home Tutor to continue to visit. In other cases, the child was the only child at home during the day, therefore parents decided to take the child to a language group, kindergarten or to both of these services simultaneously in order to ensure that their child had company of his or her own age.

## Outcomes for the Children

For the 270 children who were involved in the home-based programme, Anau Ako Pasifika provided the stepping stone to language nests, kindergartens and other ECE centres. For a few of these 270 children, Anau Ako Pasifika provided the only option for early childhood education.

The richness of Pacific Island language rhythms found in chants, poems and rhymes has been the gift from their parents and family members, freely shared during home visits. These activities help the children when they progress to language nests. The children's social development is enhanced through the interaction with parents and grandparents and with other children in group sessions. Manipulative skills, experiences with art materials and enjoyment of movement and dance in outdoor activities help the development of muscular coordination and confidence.

During home visits and small group sessions, the children's listening skills are attuned to the language environment surrounding them. Children create and recreate sounds and try out their skills in verbalisation in an environment of cultural warmth with strong feelings of identity. Familiness, togetherness, give both a challenging as well as supportive and nurturing environment. Children learn to express their needs verbally. The courtesies of social interaction, ability to say a simple prayer, to ask questions and to respond to queries are natural learning points during a home visit. Children are motivated to play their part in the church's White Sunday programme, the culmination of disciplined learning by supportive parents. Children also develop confidence and increase their language ability through the many experiences with indoor and outdoor play.

When Home Tutors visit, they are not just filling a gap, but leaving parents and caregivers more confident and capable of making the most of their skills and strengths. Observing tutors work with children helps parents to realise and become more aware of their own roles as educators of children. Commonly held views of "teachers as the experts" changed when parents became more aware and increased their knowledge of the variety of activities and resources which they could prepare for their children.

Participation in the home-based programme helped families to come out of their shell and include their children with cultural groups. Families who needed to find out about their cultural background, values and ideas were helped and encouraged by Tutors (particularly Niuean and Tokelauan families) to increase their involvement with cultural events by running, for example, group sessions with their children. Parents/families meet up with others in similar circumstances to themselves (often families get very lonely and isolated from their own ethnic groups) and by so doing gain confidence and increase their skills. Parents' confidence was shown also through their increased use of support services such as the Department of Social Welfare, health services, public library, polytechnic and other agencies. A few mothers became supervisors of language nests and took on training courses in early childhood such as the New Zealand Childcare Association/PACIFICA field-based training.

Anau Ako Pasifika has given the parents the opportunity to talk about the importance of the maintenance of the mother tongue. Parents benefited by having someone (especially the Home Tutors) who would listen and help them confirm for themselves the need to pursue the use of the mother tongue in their interaction with the children. The importance of the mother tongue as a medium for formal instruction and learning in developmental activities has been the focus of home-based and group sessions.

Anau Ako Pasifika concepts and the use of community paraprofessionals have raised the consciousness of families and increased parent involvement in the education of their children in the homes and in raising their awareness and participation at primary schools. Anecdotal evidence points to the programme having very positive effects on the personal development of parents in taking a personal interest and closer involvement in the education of their children through quality interaction with them. Parents are encouraged to be responsible to their communities and to involve community resources in meeting the educational needs of

Anau Ako Pasifika children. Parents, through their involvement in the Anau Ako Pasifika Project, are advocates for their children.

Sewing the seeds for family awareness of what they themselves can accomplish - encourage, praise and share in the child's world of music, drama experiences, story telling, listening, questioning, solving problems, appreciating nature.

Measured against the research findings, the limited number of families visited, the home visits at the real 'face' of the project revealed the real joy, spontaneity and exuberance of Pacific Island children. The mother's enthusiasm and concentration as she observed and interacted with her child brought out the Pacific Island language which gave life and light to the self-esteem and confidence of the child. We see children in homes learning intuitively - becoming cognitively engaged with the wide collection of resource materials. We observe them learning from within the cultural perceptions enhancing their well-being, their inner selves, and self esteem.

We thank the Bernard van Leer Foundation for this rare opportunity to work with Pacific Island families and children. We thank the generosity of Pacific Island families for their welcome into their homes, of all field workers.

# QUALITY IN SERVICES TO YOUNG CHILDREN - THE EUROPEAN APPROACH

## Keynote Address: Fifth NZ Early Childhood Convention

Helen Penn
Research Fellow, Institute of Local Government Studies, University of Birmingham.

I'm very pleased to be here in Dunedin. I was in Wellington about 18 months ago and was so impressed by all the educare developments, that I was keen to return and see how it was working out in practice.

In this talk today I propose to discuss some of the work taking place in the European Community about Quality in Services to Young Children.

Britain is part of the European Community and her legal, fiscal and cultural connections with Europe are becoming more important than those with the Commonwealth and America. The European Court at the Hague is already a kind of European Supreme Court, and can - and has - adjudicated on a number of issues, including equity issues, over-ruling British courts. Next year, 1992, we will become part of the free European market, which means in theory any citizen of the European Community has the right to work anywhere within it, protected by a common set of working conditions and social support which will apply everywhere and which is a good deal more egalitarian than our present government finds tolerable.

In the European Parliament the British Tory party sits and votes with the neo-fascists, because no other caucus will accept them. So in European terms Thatcherism has been a kind of joke, a perversion. Similarly America is an abberation, for its economic and cultural standards are too untypical to be relevant to European concerns.

In terms of early childhood education in Europe, there is a tradition of publicly funded publicly run services, coherently organized and well- financed. For instance, France provides full-time nursery education for more than 95% of three and four year olds, and for 40% of two year olds. Spain has an educare system. The Ministry of Education in Spain is responsible for all education from 0-16 and it is planned as a continuous pattern throughout the different stages of schooling. All those working with young children must now undertake a three year teacher training course.

Throughout much of the European community private and voluntary services to young children (at least for over threes) are uncommon because state systems are so widespread. It is almost impossible to translate the word 'voluntary' into French, Spanish or Italian because it so strongly signifies the Catholic church.

The European Commission, that is the Civil Service of the European Parliament, took early childhood education on board fairly early on.

In 1986 the Directorate of Social Affairs, Employment and Education, under its equal opportunities programme, set up the European Childcare Network. Networks are a common way of working in the EC. Generally they consist of a co-ordinator, and representatives or "experts" from each member state. They collect information about their sphere of interest, disseminate it, and act as a ginger group, both at EC level, and within member states, to promote the issues with which they are concerned. The European Commission supports the network financially, and considers recommendations for action which are put forward from the networks. They are not exactly official bodies, but they are an informal way of working across member states, and often wield some influence in their field.

In 1988 the European Childcare Network produced its first review of childcare services across Europe. Each expert from each member state produced a national report which reviewed data about services in as systematic a way as possible - a difficult task given the paucity of statistical information in some countries. The data was then collated and produced as a European report with recommendations. The Network then launched a number of action projects, very small scale experiments, undertaken jointly with sympathetic governments or local authorities. For instance I was involved in a Men as Carers action project in Glasgow; other projects have been about granny care; anti-racist childcare; working in rural areas; and so on. There has also been a small scale exchange programme, whereby administrators and workers from different member states go on exchange visits.

In 1990 the Network organized four "technical seminars" on key issues in the development of early childhood services - training, (the Hague); men as carers,(Glasgow); rural developments,(Athens) and on quality in early childhood services,(Barcelona). Each seminar which lasted for three days was for invited researchers, practitioners, and in some cases politicians, from each member state who were working in the field of the seminar topics. The work on quality, which the EC is about to publish, was an outcome of the work on quality.

This year, the Childcare Network produced an update of its review of services and revised its recommendations. The intention is to get them included as part of the social charter, although the political machinations of the British Government, which is opposed to them, may delay their adoption. The recommendations are:

- harmonizing employment leave and early childhood services to make it easier for parents to combine work and paid employment. These include maternity leave; paternity leave; parental leave for either parent during infancy; and leave for family reasons.
- the setting of realistic targets for the expansion of publicly funded services determined by a formula related to national income and levels of need.
- the development of locally based high quality and coherent services for children up to at least age 10.
- the assurance of appropriate pay, conditions, training and support for all early childhood workers.
- monitoring progress to meet objectives.
- EC financial aid for the poorest regions.

The recommendation stresses that all early childhood services do not have to be identical. Local developments to meet local needs are important, within the overall framework. On the other hand, workplace provision is to be discouraged, as a form of segregation of children.

## The EC Document on Quality

This is the context for the work on quality, to be published by the EC. It arose from the Barcelona technical seminar on quality. The work on quality is an attempt to provide both a philosophical and a practical framework to explore and improve the quality of services for young children throughout Europe.

It argues that quality is not an absolute and definable attribute; nor is it a matter of devising more sophisticated methodology to measure it accurately. On the contrary quality itself varies according to the values and beliefs of those running the services, working in them, and using them. The issue is to articulate those beliefs, reconcile them between the different interest groups involved, and justify the beliefs in practice. It would be difficult to take any other approach in Europe, given the diversity and range of European provision, from Britain's pre-occupation with regulation and avoidance of child abuse, at one extreme, to the warm and robust attitudes of adults to children in southern Spain, at the other extreme.

The European document on quality takes an open ended and questioning approach to quality. The extent to which we question what we are doing and why is sometimes limited; how often do people question themselves deeply about what they believe? In other words, it is the process of questioning and learning which is stressed, as well as the end result.

This is a much more time consuming, complicated and ambitious way of finding out about quality than accreditation, of having a checklist or an observation schedule, and giving marks out of 10. It is not directly concerned with minimum standards, that is on laying down guidelines about the basic levels which must be achieved. Nor is it concerned with comparisons and norms, that is how one nursery compares with another on a given scale. Instead it asks a broader question: what is the most we hope for in looking after and educating young children? The EC document is therefore more of a discussion and training document rather than a prescriptive exercise.

The document also acknowledges that nurseries or childcare settings, whether public or private, do not exist in isolation. So it also asks questions about the system which supports them, the local and governmental systems and structures which make it easy or difficult for them to exist and to translate their values into practice. The EC document is also concerned with quality assurance with how early childhood settings are supported, financed and monitored.

In this short space of time I can only dip into the document, and give you an indication of the areas which it covers. First of all, it makes a statement about the rights of children. What should young children be entitled to in the services they receive.

**Values**

The document suggests we should respect the rights of the child:
- to a healthy life
- to spontaneous expression
- to be esteemed as an individual
- to dignity and autonomy
- to self-confidence and zest in learning
- to a stable learning and caring environment
- to sociability, friendship and co-operation with others
- to equal opportunities irrespective of race, gender or disability
- to cultural diversity
- to be part of a family and a community.

**Quality of Services**

The EC document then goes on to discuss what kinds of services could ensure that these rights can be translated into practice. It suggests that there are ten "blocks" or quality areas which could be usefully discussed. "Ten" is an arbitrary number, since the blocks inevitably overlap and interconnect with one another. Moreover, different groups might choose to focus on certain blocks rather than others in expressing their values. However it provides a model or framework for further elaboration. Each of the blocks in turn carries a set of questions. The ten blocks are:
- Accessibility and usage
- Environment
- Learning activities
- Relationships
- Parents' views
- Valuing diversity
- Community
- Assessment
- Cost benefits
- Ethos.

Let's look at one of the blocks, parents' views, to give you an indication of the way in which the questions are posed.

***Parents' Views.*** This set of criteria explores the nature of partnership between parents and those looking after and educating their children. We have used the word "parent" but we are conscious that this word is gender-blind and generation blind and that useful distinctions might be made between mothers and fathers and other close relatives. We are also conscious that parents are not a homogenous group like professionals, but are as diverse as their children.

- Are there ways of measuring parents' opinions or views about the childcare setting?
- Do parents feel welcome?
- Do parents have enough time to leave their child at the beginning and greet their child at the end of a day or session?
- Do parents feel they have enough information about the progress of their child?
- Are parents able to give information about the progress of their child?
- Are parents informed about the daily activities and routines and the reasons for them?
- Can parents comment on or contribute to these activities and routines?
- Can parents stay and join in mealtimes or some other activity of the nursery or childcare setting?
- Are parents involved in discussing or setting the curriculum or programme for the nursery or childcare setting?

- Can parents be involved in the management of the nursery or in the selection of staff or in the financial control of resources?

**Quality Assurance**

After outlining the ten blocks on quality of services, the document goes on to look at quality assurance, and suggest a further ten quality assurance blocks. These are:

- policy
- legislation and guidelines
- financing and resources
- planning and monitoring
- advice and support
- staffing
- training
- physical resources
- research and development
- integration and co-ordination.

Again, questions are asked about each quality assurance block. For instance the block on research and development poses a number of issues.

***Research and Development***

Research is traditionally a rigorous examination of specific contexts or events. It can also be seen in a broader context of encouraging and supporting staff and parents to systematically explore aspects of practice in their own nurseries or childcare settings which are problematic or warrant further development, for instance bilingualism; or the use of art or puppetry as a means of expression.

- Who finances research programmes for young children?
- Who decides the criteria for research programmes
- How are the criteria arrived at?
- Who decides the methodology?
- How does research relate to policy?
- Who undertakes the research?
- How do researchers work with practitioners?
- How do practitioners work with researchers?
- How are the results of the research disseminated?
- How is research linked to training?

This gives an indication of the approach, format and contents of the EC document on quality. Whilst it deals with the technicalities of working in services, it is also a political document, political with a small p. It holds out ambitions of what can be accomplished. If Portugal, the poorest country in the European Community, can have a programme of expansion of publicly funded early childhood services, so can richer nations like New Zealand and Britain. In the last resort providing services and assuring their quality is not merely a professional or a financial issue, it is a political one.

# KEI HEA TE KOMAKO E KO ?
# EARLY CHILDHOOD EDUCATION
# A MAORI PERSPECTIVE

Hutia te rito o te harakeke
Kei hea te Komako e ko ?
Kimai ki au
He aha te mea nui o te ao ?
Maku e ki atu
He Tangata, He Tangata, He Tangata

Pluck the centre shoot from the flax bush
Where will the Bellbird sing ?
Ask me
What is the most important thing in the world ?
I will say
It is People, It is People, It is People.

[ Aupouri ]

Fifth Early Childhood Education Convention Dunedin, New Zealand
Arapera Royal Tangaere. 1991.

## INTRODUCTION:

Early Childhood Education - a Maori perspective - is not just about very young children, Maori children, it is about our heritage, about the survival of our language, about the Maori people's struggle for self determination.

Therefore the question that we as Maori people will need to ask is

Kei hea te Komako e ko ?
Where will the Bellbird sing ( for us ) ?

The whakatauaki from which this saying is taken reminds us of the importance of caring for the centre shoot of the flax bush so that the plant will grow strong, flower, and the Bellbird will be attracted to its nectar. One of the rewards for this care is the joy of listening to the beautiful voice of the Bellbird.

Take care of our young and humanity will sing.

Early Childhood Education has always been an important time of life for the Maori people. The child from bifth, epitomises the preciousness of life and the specialness of women emphasising our strong tie to the land. [Pere,1986]. It is no mistake that the Maori word for placenta and for land, 'whenua', are one and the same. It tells us of the responsibility that we have to our land, Papatuanuku, to people, and to life itself. Just as the unborn child relies on the placenta for nourishment so too does the child born into the world rely on the land.

'Whenua ki te whenua' 'Placenta to the land'
'Whenua ki te whenua' 'Land to the placenta'

Hence the placenta is returned to the land to complete the cycle.

This very understanding of the depth of meaning of life and importance of the need to nurture the child's many dimensions with the appropriate food, is the philosophy of Early Childhood for the Maori.

The imparting of this sustenance to the child begins from the time that the child is known to exist in the mother's womb. The physical wellbeing of the unborn child is entrusted to the entire family who are responsible for caring for the mother. This responsibility is taken seriously to ensure that the mother's needs and cravings are catered for. The unborn child is housed in an environment of love received from its family and it is important that the mother experiences the least amount of stress, so that the development of the child's character is not marred, - so that the child will be contented and easily satisfied,- so that it will be in tune with its people and its environment.

You may ask what has this to do with Early Childhood Education. I say that to understand a Maori perspective of this important area one needs to understand the depth of feeling that the Maori people have for their very young. These special people are not only linked to the future but more importantly they are linked to the past, for they have come into existence only through the whakapapa or geneology of their ancestors.

The very young child was often seen with other important members of the family, the elders, who were usually the grandparents. It was not unusual for the elders to share their knowledge, experience and stories of the tribe. ' There is a very special relationship in Maori society between the very old and the very young. ' [Ritchie, 1970, p50.] The child's character and personality was shaped and not only did s/he acquire the values of the culture but also learned to socialise and act according to custom. The one main thing was that s/he learned that s/he was an accepted member of the whanau always surrounded by love and support.

This is but a brief insight into the Maori philosophy for Early Childhood Education. It is based on the importance of people within the extended family, where as an harmonious unit in tune with the land, the child was able to develop and grow.

The Maori child was a free spirit.

I remember my own childhood as being one where I was well loved by my grandparents and allowed to experience the joys of Papatuanuku, her trees, her waters, the animals, her very shape. By my grandparents and parents side I learned to respect her bounties. I learned to love her and appreciate her beauty. I learned to roam and play with her. I learned to feel her presence. This was my Early Childhood Education.

**HISTORY:**

From the time of contact with the European the Maori people were fascinated with their technology and believed that to understand the knowledge of the Pakeha and to have access to this knowledge one needed to read and write. These two skills seemed to hold the key to the Pakeha's power.

The Missionary schools, pre the signing of the Treaty of Waitangi, produced Maori people who could read and write in two languages. There is ample evidence of this in the library. After the signing of the Treaty, schools for Maori people were under the Protectorate Department, the equivalent to todays Ministry of Maori Affairs. In 1867 the Native Schools and the Education Acts were passed by government and eventually Maori education was transfered to the Department of Education. The hard line approach of the newly formed settlers' government to the assimilation policy , coupled with the massive loss of land and the inability to combat the new 'Pakeha illnesses' saw Maori self esteem and morale soon dwindle away. The denial of the language for the next one hundred years, within the education system, ensured that its status and apparent worth were lowered.

It was thought that providing education in English only, would produce Maori people who would be "successful". By the 1960's Maori children's rate of failing in schools was high. The Hunn report stated that Maori people had the worst health and education in New Zealand. The fault was placed on the inadequacies of the family, and not on the inadequacies of the education system which gave rise to a strong sense of guilt and a need to try to rectify this situation. According to McDonald, (1970, p 137,) the inadequacies were defined as the inability for disadvantaged children to learn many of the things that the middle-class child learns at home, and the inability to 'use language as a tool for learning'. Preschool Education was seen as a way of compensating for these deficiencies and giving the Maori child a sound foundation for school.

The Maori Women's Welfare League Conference in 1961 saw the importance of preschool education and encouraged their members to actively promote the benefits of this for Maori children.

The Maori Education Foundation in its first Annual Report, 1962 p7, stated that a considerable share of its energy and funds would be devoted to encouraging 'intellectual growth in the preschool child' and supported this move by appointing a preschool officer, Alex Grey. Many new groups mostly Playcentres,were established mainly in the Northland, Waikato, Bay of Plenty and East coast and ,was carried out by Maori women.

Out of this developed groups called family preschool, or family play groups, where similar to Playcentre, mothers attended the sessions with their children. In the Waikato, these groups, formed a collective called the Maori Family Education Association. Many of the preschool groups in the above areas consisted mainly of Maori families. Some of these groups had the Maori language present in their programme but at varying degrees of introduction.

By 1968 5.2 percent, [1133], of all children in kindergarten, and 9.0 percent, [1161] of all children in playcentre were Maori, [McDonald,1970]. In a survey conducted by Richard Benton (1978), he confirmed that many Maori children were growing up with little or no knowledge of their language. At a Kaumatua Hui, organised by the Department of Maori Affairs, 1979, concern was expressed that the Maori language was rapidly becoming extinct. They affirmed the importance of the language with the statement

" Ko te reo te mauri o te mana Maori."
" The language is the life principle of Maori mana."

From that meeting it was decided that the very young Maori child must be taught the language by drawing on the resources of Maori language and information found only in the small numbers of fluent speakers and elders who were left [Meade, 1988]. Thus was born te Kohanga Reo, the Maori language nest, where Maori children under five, would be totally immersed in the Maori language programme based on a Maori view of the world.

No one anticipated the enthusiasm of the Maori families, and the way that they took hold of the philosophy.

> 'It became a focus for Maori deeply concerned with the impending loss of
> spoken Maori. ' [Hohepa 1990]

The first Kohanga Reo was opened in April 1982, at Pukeatua Kokiri, Wainuiomata, Wellington. Within a year and with very little funding 107 more centres were established. By the end of 1983, 267 centres catering for aproximately 3000 children were operating. [Department of Maori Affairs 1984]. According to the 1991 Ministry of Maori Affairs Report on Maori Education, by the end of 1990, 616 kohanga were established. As stated in this report [ibid p4] over a quarter of all Early Childhood services were Kohanga Reo, and, since the numbers of Maori children attending other Early Childhood Education services had not dropped then it could be assumed that Kohanga Reo was attracting Maori children who were not previously attending any Early Childhood service. "Kohanga Reo have, therefore, contributed to closing the gap between Maori and non-Maori participation rates in Early Childhood Education." (Ministry of Maori Affairs, 1991, p3).

The success in the establishment of a vast number of kohanga in such a short space of time was due to the dedication of the Kohanga Reo National Trust in conjunction with the energy and commitment of the Maori people. Here at last was a movement established by Maori people, for Maori people, and, determined by Maori people.

## MAORI IN EARLY CHILDHOOD EDUCATION:

Before the birth of Kohanga Reo, the inclusion of anything Maori in the Early Childhood programme was limited to a selection of songs, 'stick games', poi and some 'crafts'. Very rarely was the greeting ' kia ora' heard. The advent of kohanga raised the level of awareness of early childhood education, 'Maori style', and certainly raised a certain level of curiosity and speculation amongst the more well established groups. According to Cook (1985 p54 ), 'the early childhood world was generally incredulous when informed that it was planned to have 117 centres in operation six months later.'

However it was the presence of Kohanga and the 'deprogramming' of Maori people throughout the country, so that they would understand the many folded pupose behind the movement, which returned, to Maori women, such as myself, the open pride in being a Maori. Kohanga Reo forced me to recall my Maori view of the world. This is not an easy process when one is used to thinking communicating and negotiating in a monocultural, Pakeha world.

As Kohanga grew in strength and established itself as an 'organisation' that the Maori people wanted, then so too did Maori women in other Early Childhood Education organisations grow in strength. These Maori women throughout Aotearoa supported and even fought for the rightness of Te Kohanga Reo. They spent many hours explaining and sharing their culture with their pakeha friends. Not only did these women work and fight for the 'rightness' of Early Childhood Education but they also remembered their obligations to their own Iwi and spent many extra hours with their people. Many have learned or re learned the Maori language and, in choosing to straddle the two cultures, continually juggle the two cultural world views.

Alongside these Maori women stood the women of Early Childhood Education - Pakeha and Pasifika women, who saw the vision of Kohanga and the strong desire for Maori people to revitalise the language and determine their own future.

At a Lopdell inservice course, 'Taha Maori in Early Childhood education' September 1988, the challenge was put by the Maori women to their Tau Iwi sisters to stand beside them and not only support Kohanga Reo but also to acknowledge the Maori people as Tangata Whenua. In order to do this it was necessary for Tau Iwi to acknowledge the true intentions of the Treaty of Waitangi.

> To honour the Treaty of Waitangi we require that all Early Childhood policies and provisions be consistent with the principles of partnership, power and participation which are embedded in the Treaty.[National Residential Course 1988]

and

> We believe that in honouring the Treaty of Waitangi and Tangata Whenua we are also honouring Early Childhood beliefs, concepts and values. [ibid]

and

> We recognise the capacity of Early Childhood people to address and resolve wider issues in society because of a commitment to create and sustain learning environments that develop a positive concept in each and every child.[ibid]

Representatives from most of the early childhood organisations were at that course and from it were put forward eight areas to consider. These were

1 Programmes and Charters - a commitment to the promotion of the Maori language and culture.
2 Monitoring of the ECE programme - through the Education Review Office and a National Early Childhood Runanga Group for Taha Maori.
3 Qualifications - recognition of Kohanga Reo training.
4 Representation - Maori people represented at all levels of decision making and particularly during interviews of staff for early childhood and students for early childhood training.
5 Advertisements - in Maori as well as English and the equity policy of the Colleges stated.
6 Teacher Recruitment - a paid Tangata Whenua representative on the recruitment/selection/interview committee.
7 Training - a course similar to Te Ataakura, (Secondary) be established for ECE. The requirement for ECE people to attend anti racism and Treaty of Waitangi courses.
8 Resources - an urgent need for a basic supply of Maori resources, as well as an establishment of an affordable ECE Maori advisory service to help implement taha Maori in centres.

The introduction of taha Maori into the early childhood programme had certainly taken a huge step since the suggestions that were made in the two working party reports on Kindergarten and Childcare Training, 1986. In these two reports the Treaty of Waitangi was not mentioned and the Maori culture was hidden in the multicultural section of the curriculum.

The Social Equity Policies of the 1984 - 1990 Labour Government gave strength to the need to address the concerns and issues which affected minority groups of New Zealand society. As part of the policy this government also attempted to redress Maori grievances under the Treaty.
The Meade working group took the terms of references of the Social Equity Committee seriously

The Meade working group took the terms of references of the Social Equity Committee seriously as many of the members were aware of the history of Early Childhood, and that this sector of education understood what inequity was. Education To Be More [1988] brought together the recommendations, reports and dreams of many early childhood people. (May 1990, and personal experience).

> Its holistic view made clear that Government support for Early Childhood Care and education was not about providing good quality education for the under fives, but also about supporting women, and in the case of Maori and Polynesian communities, it was a question of cultural survival.[ May 1990].

For the Maori people it was also about the right to determine their own future for Maori children and to have a share of the resources and power so that 'Tino Rangatiratanga',( self determination) would be achieved.

The Government response to the Meade Report was Before Five.[1989] which was followed by the Implementation Task Forces. These groups' role was to put into place the government policies of Before Five . The 'Poutokomanawa' (centre poles) of early childhood were specially selected and brought together to work alongside government department representatives.

As a member of one of those groups I found the atmosphere exhiliarating, knowing that although there was an extremely tight time frame, the vision for Early Childhood was within grasp and coupled with this the pathway to a bicultural future.

Maori people with years of experience in early childhood, were represented on all the implementation units. Although some had contact with Kohanga Reo none of the Maori people officially represented the National Kohanga Reo Trust. When questioned about this oversight it was explained that it was not in the terms of reference of the Implemenation Unit to act on behalf of Kohanga. However many people involved in the implementation process were very aware of the affects that decicions made for early childhood would have on the Kohanga movement, particularly the group working on the Bulk Funding. The working groups did consult with the National kohanga Trust and this certainly happened on several occassions, where funding issues were concerned.

## WHERE ARE WE NOW ? :

Much has happened within early childhood in the last decade, from a Maori perspective. The challenge that was issued at the 1988 Lopdell course set off a chain reaction of commitment towards addressing Tikanga Maori and the Treaty of Waitangi. Although some of this commitment may have been driven by the fact that under the requirements of the charter agreement with the Ministry of Education, a centre was required to show a management plan with regards to the Treaty, many of the organisations accepted the challenge with genuine sincerity.

In 1988 at its annual conference the New Zealand Childcare Association made a commitment to the Treaty of Waitangi. Not only did it adopt the philosophy of working towards biculturalism but it also looked at its structure, its staff and Area Training Supervisors, and its training course. It actively recruited Maori people into its organisation and established a runanga to support these people.

At the Playcentre National Conference in Hamilton, 1989, three resolutions were passed, a commitment to the Treaty of Waitangi, a commitment to biculturalism and the establishment of a Cultural Working Party. In 1990 a booklet was produced by that Working Group on Cultural Issues. Every Playcentre in New Zealand now has a copy.
The book states its second guiding principle as being ;

> Playcentre has made a commitment to becoming bicultural and honouring the Treaty of Waitangi. In order to work out what this partnership may mean, consultation with Tangata Whenua must be the highest priority through this process. [Working Party on Cultural Issues 1990]
>
> A Maori runanga was also established to support Maori people within Playcentre.

Within the Combined Early Childhood Unions of Aotearoa is the position of National Maori Co-ordinator, who is at an important level of decision making. The kindergarten and childcare Maori staff within the early childhood services have been meeting since 1986 so that they may discuss issues concerning Maori in ECE. The New Zealand Federation Kindergarten Union have made a commitment to honouring the Treaty of Waitangi.

Barnardos New Zealand have made a commitment to biculturalism and have organised Treaty workshops for staff.

The six Colleges involved with training students for the Diploma of Teaching ,Early Childhood Education, have also made a commitment to the Treaty. Although each college is at a different level of development towards this commitment, Tikanga Maori, Te Reo Maori and the Treaty of Waitangi are an integral part of the Diploma.

As the three year diploma was regarded as the 'benchmark' for all Early Childhood Education training, the New Zealand Qualifications Authority who had based the core curriculum on the recommendations from the Childcare Training Lopdell course 1986 found it necessary to include Tikanga and Te Reo Maori, and, a module on the Treaty of Waitangi.

The Early Childhood Development Unit, (ECDU), is the baby of the Meade Report. The implementation working group of Before Five had the opportunity to develop a structure which would reflect a Maori and Pakeha perspective, side by side. The ECDU as well as having two Board members who are Maori, also has a Maori person at the National Management level. This person's title is 'Te Kaiwhakau o te Tiriti', the Keeper of the Treaty. In the eleven districts there is one Maori Co-ordinator position . One of their roles is to advise Early Childhood services and provide inservice courses on Taha Maori . From these eleven Maori co-ordinators is elected a National Maori Co-ordinator who oversees the Maori kaupapa for these staff and gives support to Te Kaiwhakau o te Tiriti. The ECDU has not only given support to working within two cultural dimensions, Te Iwi and Tau Iwi, but has also actively introduced a structural framework so that Tangata Whenua are present at decision making levels.

I am aware that the announcements from the recent budget has put a strain on the Early Childhood organisations. There is a warning here, for - the continual chipping away at the early childhood structure to adhere to a free market, new right policy will chip away at the very core - our philosophy,

- what early childhood education people have worked for over many years.
- our right to determine our philosophy for ourselves.
- our Tino Rangatiratanga

To work together in a partnership is not an easy task. There is bound to be pain but there will also be the joy of discovering new knowledge. The journey is difficult.

## WHERE TO FROM HERE ?

At present the future for Maori education is ambiguous and confusing.

The Ten point plan for Maori education developed by the Ministry of Education states that it wants to foster increased participation rates of Maori children in early childhood education programmes, (point 3 ). Provide resources to support Maori language initiatives at early childhood primary, secondary and specifically Kohanga Reo level, (point 7 ) and provide support for research into the needs of pre-school children graduating from Te Kohanga Reo and into the effectiveness of taha Maori programmes in mainstream education (point 8 )

Yet the draft copy of the National Curriculum for Primary and Secondary schools has had all Maori words removed and has Maori language alongside other foreign languages. Yet the agenda of the Government is to promote success of the individual, encouraging individual competitiveness. This new right policy is supported and promoted by the big businesses in New Zealand. However, according to Marshall, Peters and Smith (1990), it " undermines the 'group rights' and interests implicit within Maori culture."

> 'The potential outcome of these new right views on education would be further assimilation of Maori, and death for Maori language and culture.' ( Marshall, Peters & Smith, 1990)

This government has not shown that it has a genuine commitment to acknowledging the Maori language, even though it is now an official language of New Zealand let alone acknowledging the Treaty of Waitangi.

One message says that there will be support for taha Maori in mainstream early childhood and support to Kohanga Reo with particular assistance for Maori children so that they may achieve. The other message says that within the charter the Treaty is optional.

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To support taha Maori without it being a form of tokenism in early childhood and in education, one must recognise the Maori people as Tangata Whenua. One cannot do this without 'knowing' the story, Maori and Pakeha, of this country, and therefore one cannot escape from 'knowing about' theTreaty of Waitangi.

We cannot go back to the days of just Maori songs, pois and crafts. To do this would be culturally oppressive. This form of action alone will not give rise to better cultural understanding and sharing. Maori people are still struggling for their physical , mental and spiritual 'wellness'. There are not enough Maori people in the decision making areas. We are still reliant on the support of Tau Iwi to repair the pain of one hundred and fifty years, together.

> 'The consequences of the full implementation of new right ideology into New Zealand education and schooling is frightening enough, however it is the inherent assimilation and cultural annihilation tendencies embedded in the new right policy that requires all New Zealanders to respond strongly and vehemently to policies of this type, and to reject them. The acceptance of these policies is to embark on a dangerous journey: the ultimate outcome for Maori and for New Zealand as a whole, would be social and cultural catastrophe.'( Marshall et al 1990 )

Early Childhood Education is one area which has the strength to give support to the place of Tikanga Maori in New Zealand.

Where is it now in your list of priorities?

Early Childhood Education is rich because of its diversity. Each organisation acknowledges the specialness of individual children and the right to have access to quality care and education which is developmentally and culturally appropriate.

Are you in danger of being assimilated in a free market new right culture?

Early Childhood Education people have had a history of struggling for equity whether it be class, gender or race related.

Is the clock being turned back?

Early Childhood Education people having experienced these inequities have developed a common bond.

Is it still there?

Early Childhood Education people in New Zealand are acknowledging Maori people as Tangata Whenua and are committed to working towards a bicultural New Zealand.

But is time running out?

Early Childhood Education people are not afraid to stand by their commitment to quality education and to the true intent of the Treaty of Waitangi.

Will this still be the case tomorrow?

Early Childhood Education people can afford to look back to the past, but cannot afford to return to the past.

Kia Tupato, Be Careful.

As a Maori Early Childhood Education woman I do salute the Early Childhood Education movementof Aotearoa. Our strength, your strength, together we will watch the kakano grow, and we will hear the Bellbird sing.

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# STARTING WITH EACH CHILD: THE CHALLENGE OF PROGRAMMING FOR UNDER THREES

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[This paper is written similarly to the way it was presented; hence its informality.]

What happens to under three year olds in child care has been an enduring interest in my professional life. It has been a challenge to think of how to talk about such a topic to people who have different amounts and types of interest in care for babies and toddlers. I assume that what we all have in common is the recognition that the need for care for this age group is increasing, that the quality of that care is important, and that there are relatively fewer people with expertise with this age group than with over three year olds. Those of you who work with the age group may also feel that there are fewer sources of support and resources and lower status for those who work with the very youngest children.

While I will be addressing care for under three year olds at a fairly practical level, the topic does relate in an obvious way to the conference theme, the impact of social change on families, in that because of changes in society, there is increasing need for care for very young children. Secondly, within our profession, there is increasing recognition of the need to provide appropriate experiences for this age group, recognition that keeping them safe and happy is not sufficient. It was not so long ago that in many centres there was a discrepancy between the quality of care offered to over threes and under threes, with better and more equipment, greater attention to programming, more highly qualified staff, a larger amount of space, and often consequently higher morale and greater enthusiasm among the staff working with older children. Although I cannot speak for New Zealand, my impression is that fortunately those days are mostly over.

About my title: As it had to be indicated to the Conference committee long before I had thought in any detail about what I wanted to say, it does not fit exactly with the theme of my address. When I began to think about what I wanted to do with the topic, I almost wished I had called the address "A Home Away from Home" or "There's No Place Like Home", for several reasons. Firstly, they convey the notion that nothing can replace a good home and family in child's life. Secondly, they suggest that children's services, particularly child care, should try to emulate the characteristics of a good home experience, a point so often made that it qualifies as a cliche, but one well worth reflecting on. The danger however, in such a title is that listeners might infer a belief on my part that their own home is the best place for children to be, and therefore view this as an anti-day care talk, which it most definitely is not. My address is not about the controversies around whether in the best of all possible worlds every child would be at home with a parent who wants to be there. I used to believe that, but I am not so sure any more. What I do believe is that children have a better life when their parents have a choice about working outside the home when their children are young or staying at home with them, and that a critical component of having a real choice is access to affordable high quality child care.

In addition, the titles might be seen as reflecting an anti-day care centre and pro family day care home perspective, which they do not. Each of those settings has unique strengths and challenges in providing quality experiences for babies and toddlers. However, when they are good, family day care and centre based care are very similar in the experience they offer to babies and toddlers, and both should be available for parents to choose from.

So the safe option was to leave the title as it is, because whatever else I might want to say about programming for babies and toddlers, I would always say that effective programming must begin and end with consideration of the individuality of each child.

## Definition of Programming

My definition of programming is as broad as it can be: what adults do and do not do that affects the daily experiences of babies and toddlers. So it obviously follows that my definition of the program is broad, encompassing every aspect of the child's experience in care: routines, interactions with adults and other children, the physical environment, arrangement of space and materials, as well as what is commonly thought of as the program, namely the activities or experiences provided for the children. My definition is broad because I believe that the times that in some programs are left unscrutinised, not thought about, "throw away times", convey more powerful meanings to children than what might be labelled conventionally as the program or curriculum.

One of the major obstacles to good practice with young children is that the program is sometimes viewed as consisting of a few "special" activities initiated by adults or set up by adults at specific times during the day and for a restricted amount of time, sometimes in an otherwise fairly sterile environment, and the rest of the day is devoted to routines and so-called "free play", meaning that nothing is planned, nothing is set up, and adults lapse into custodial child minding. The common claim that "Every day we do two or three activities" should be replaced by "Every day we offer hundreds of opportunities for babies and toddlers to get involved with people, equipment, and materials in ways appropriate to them". The program happens all the time that at least one child is present.

## Components of Quality

There are some widely acknowledged determinants of quality which I will only mention: attention to group size and age range, space (amount and arrangement), numbers of staff and staff qualifications. In only mentioning these, I do not mean to give the impression that they are insignificant. Quite the contrary, as attention to them is critical to the provision of experiences of high quality to young children.

In the rest of this address, I will discuss some less obvious but essential components of a good program for babies and toddlers, or, for that matter, for young children of any age. Not surprising, these have mostly to do with the adults in the program. The essence of what makes the difference between appropriate and inappropriate practice, what makes the difference between a program of high quality and low quality, is the skill, sensitivity, and professional judgments of staff. The interactions between adults and children are the most important part of the curriculum. Greenman (1990) goes so far as to say that in child care settings the aim should be to set up the environment in such a way that children can engage in self directed experiences, for the explicit purpose of freeing the adults to engage in high quality interactions with individual children. It is in the context of those interactions that the most powerful teaching and learning take place.

## Agreeing about Aims

Programming well for under three year olds starts with being clear about goals or aims. I do not refer here to aims such as getting children to be able to use the toilet independently, drink from a cup, or point correctly to body parts. Neither am I referring to keeping children safe, happy, and busy, a set of fairly common aims beyond which some children's services never go.

It is crucial for staff who work together to have a united view of what they are working toward. Yet sadly, discussing aims is an unattainable luxury in many children's services. There is consequently little sense of common purpose and team work, and people give contradictory messages to children, confusing them at least, and possibly making them feel insecure.

The sorts of aims that must be decided on are what I would call 'macro' or 'mega' aims, the big ones, ones about the kinds of people we are trying to help children become. I have made a list of aims for my own children, aged seven and ten, by way of illustration. It is in fact a list that I would have for all children.

1. Liking for themselves, or, to use our jargon, high self esteem
2. Self confidence, courage, and resilience that allow them to take risks, to "have a go", to learn from but not be devastated by failure or criticism
3. A view of themselves as part of a local and world community, compassion and a sense of responsibility and caring for their fellow human beings

4. A conviction that they can change things, have an impact, make a difference

5. Optimism, hope for the future

6. A love of learning that lasts a life time

7. Openness, a critical questioning approach, but devoid of any cynicism

8. Willingness to persevere

9. A sense of humour, the ability to have fun and to laugh

10. Something that they are passionate about, vitally interested in.

I would suggest that it is worthwhile for staff who work with babies and toddlers to think about the big goals or aims they have for the children they work with. Of course, the next step would be to look at practices in the program that promote or impede the achievement of those aims.

## Starting with Each Child

The most important starting point for good practice is acceptance of and respect for children in general and for each individual child. This requires examination of our own biases about cultural differences, gender differences, individual differences, taking a good look at the children we like less than others and asking ourselves why.

Goffin (1989) writes that respect for early childhood itself is a critical starting point; that is, accepting it as a stage or series of stages in their own right, with special characteristics, strengths, and needs, rather than an unfortunate delay between birth and maturity, with the outcome that we push children, we focus on trying to make them be the way we want them to be in the future rather than letting them be the way they are now. This is what developmentally appropriate practice is all about.

We know that each age brings a set of challenges for the adult, that these challenges are a part of normal development and will be resolved with maturity and careful teaching. Yet sometimes two year olds are made to share because we worry that if we do not make them share now, they will always be selfish, or made to sit still in groups because they will need to be able to do that later. Babies and toddlers are sometimes pressured to "eat properly" or use table manners because we think that if they use fingers now they will never use cutlery. I call those examples of the "Fix it now or it will only get worse syndrome". We must accept children "acting their age" (Stonehouse, 1991).

There are particular problems with toddlers, who are often viewed as being "in between" babies and preschoolers. Sometimes they are placed in an environment that is more appropriate for babies and is therefore boring (Stonehouse, 1988). Gonzalez-Mena (1986) has written that many descriptions of toddlers come from comparing them with older children, and the result is a negative view of toddlers' behaviour, a deficit model that emphasises what toddlers lack. She says that "when teachers or parents think of toddlers as miniature preschoolers, we invite problems because our expectations are not appropriate" (p. 47).

The most common obstacle to appropriate programs for babies is the view that the aim should be no more than to keep them safe and happy. Often they are boring for staff, who do not plan anything, do not change anything, and every day is just the same.

Programs must be matched to skills and characteristics of under threes. If we are good observers, babies and toddlers will tell us what they should be doing. What are they telling us when they engage in quintessential under threes' behaviours such as sucking the crayons and textas we give them, mounding the paste up and treating it like finger paint in a collage activity, getting up in the middle of a story and roaming around like teenagers cruising around on a Saturday night, taking food from each other's bowls, or transporting every block from one side of the room to the other and walking away when the task is completed? To work effectively with them, we need to be able to read them, so much more important than reading books. Those of us who work directly with babies and toddlers must trust ourselves and the children and let them tell us what and how they want to learn, what they need to do, and the way they want to do it.

I said previously that we should know what we are aiming for, and now I am saying, "Focus on the present". Make up your mind, you may say to me. I mean both. Good practice starts with clarity about where we want children to get to, but with a firm acceptance that children are living their lives now, not preparing to live their lives in the future.

We have an obsession with preparing children for the future: play-group should help them get ready for kindergarten or pre-school, kindergarten or pre-school is preparation for primary school, and so on. Perhaps we should start preparation for old age and dying in the newborn nursery and work from there! I would assert that the best way to prepare children for the future, for a variety of futures since we do not know what the future will be, is to meet children's needs and focus on their strengths in the present.

## Going Beyond Developmental Appropriateness

The notion of developmentally appropriate practice has obviously had a major impact in the United States, and is being talked about increasingly in Australia. I have some concerns about its Australian translation. As with anything, but particularly ideas, the further they are removed from their original source, the more likely they are to be distorted or oversimplified. The notion of developmentally appropriate practice lends itself to being prescriptive about what is okay and what is not. It is simplistic to reduce something as complex and creative as working well with children to a series of "do's and don'ts", a list. To the extent that we do that, we stop looking at children, the context, and ourselves.

To say that what we do with children must be developmentally appropriate is to tell only part of the story. Yes it must be developmentally appropriate, but it must also be appropriate in at least three other ways: humanly appropriate, culturally appropriate, and individually or uniquely appropriate. Now the NAEYC Statement of Developmentally Appropriate Practice (Bredekamp, 1987) embodies those notions, but the term 'developmentally appropriate practice' used alone may suggest erroneously that it is sufficient if an experience or a material fits with the developmental level of the group of children or even with that of an individual child.

By humanly appropriate I mean that what we offer children must support the human values we want to instill and nurture in them. For example, we would not allow them to engage in activities that harm the environment. While painting a live tree or squashing bugs might capture their interests and match their developmental skills, they are not appropriate activities in terms of human values. As a contrasting example, skills of negotiation, compromise, and peaceful resolution of conflict can be nurtured in babies and toddlers through our interactions and interventions -- humanly appropriate practice.

Let me give you a powerful example of the result of humanly appropriate practice. I saw this in a group of under three year olds, where the children receive much affection and caring of the highest order. A not yet three year old, without being asked, was staying beside, and patting in the gentlest way her baby brother, who was distressed because his father had just left. Even though an adult was not involved in that interaction, her caring and gentleness I am certain were the result of practices she had observed and had no doubt experienced herself.

By culturally appropriate I mean that what we do with children needs to fit in some way with their broader experience and embody respect for and acknowledgment of their cultural and family background. To the extent that we build links to the child's life outside our programs, we make a positive impact on the child. To the extent that we ignore, deny or de-value the child's life outside our programs, we harm the child.

I would add that it is both culturally and humanly appropriate to assist young children growing up today to be comfortable with cultural diversity, not to feel threatened by it, and to see it rather as a positive enriching dimension of their lives.

By individually or uniquely appropriate I mean that what we do with a child must make sense and be right for that child. For example, it may be developmentally appropriate to think about helping a group of two year olds start learning to use the toilet, but for a particular two year old, that may be individually inappropriate.

A second dimension of the notion of personal or individual appropriateness is that good practice happens (usually that is, we could all think of some exceptions) when adults do something with children that *they* are excited about, whether it is cooking, dancing, gardening, or a number of other interests. I have seen rather unusual or unorthodox experiences offered to under three year olds, experiences you would never find in a list of developmentally appropriate experiences, in ways that made them appropriate on all four counts.

So, in addition to DAP, which is what the Americans call developmentally appropriate practice, we have HAP, CAP, and UNAP. It begins to sound like a Dr. Seuss book! So what I am suggesting is that developmentally appropriate practice, humanly appropriate practice, culturally appropriate practice, and uniquely appropriate practice all add up to professionally appropriate practice.

## Using Power Appropriately

Some early childhood professionals feel uncomfortable with the notion that we have power over children. There is no doubt that we have power, and the younger children are the more power we have. In some of the early and most influential writing about professional ethics, Katz (1978) lists our power over children as one of the main reasons that we need a code of ethics, for where there is power there is the potential for abuse of power. At an obvious and basic level we are bigger and stronger than children are, and we use our superior size and strength to move them and remove them and to gain their unwilling compliance. We use our greater knowledge of the world to assist and protect them. We use our control of material resources to shape their experience, to motivate, reward, and sometimes to punish them. We use our priorities to shape children's experiences. I am not suggesting that these are inappropriate uses of our power, but simply support for the assertion that we have it and that we use it.

While I would not suggest that we abdicate our power, I am suggesting that we hand over some of it and use that which we retain *on behalf* of children rather than *over* them or *against* them. This requires confidence in children and ourselves. Unconfident people cannot let go of power and control. It is useful to reflect on the programs and staff that we know and the degree to which power is handed over to children. It can be seen in the way babies and toddlers are physically handled, and in fact in the extent to which they are given physical autonomy, such as being given the time to seat themselves in a chair instead of being picked up and inserted. Handing over of power is evidenced in the degree of flexibility in timetables and the extent to which programs are individualised. It can be seen certainly in ways adults respond when a determined toddler digs her heels in and says "No" with all the resolve she can muster. I assert that no one should work with young children who has a personal need to have power over someone, who has little power over other arenas of their lives.

## Avoiding Rampant Teaching

This phenomenon could also be called teaching gone berserk. This is where there is a compulsion to make experiences "educational", using that term in its most conservative way, meaning serious, adult controlled, and related if possible to identification of shapes, colours, numbers and letters. There is little concern in this serious business for relevance, spontaneity, or meaning. We have all seen some potentially wonderful experiences and interactions devastated by the adult's compulsion to teach something. You have probably heard the story about the two girls painting at the easel, one of them new to the group. The old timer says to her, "Listen, let me give you some advice. Try to finish your painting and hang it up before the teacher comes around, because she'll make you tell her about it".

We have all heard the artificial inane questioning of toddlers by adults: What colour is that? Where's your nose? How many biscuits do you have there? What's your name? Is Mummy at work? These non-authentic, meaningless questions with obvious answers must cause toddlers to wonder about the mental capacities of the adults who work with them, and have such thoughts as, "Gee, I'll be glad when she learns her colours and doesn't have to always ask me!" Teachers in the terminal stages of teaching gone berserk hardly ever smile or have a good belly laugh. They are deadly serious and earnest. If what is happening in programs for babies and toddlers is not mostly pleasurable for both children and adults, then something is wrong.

I have seen rich child directed pretend play stopped in order to pressure almost three year olds to participate in required structured table activities, or two year olds being given adult initiated instruction in the use of scissors -- teaching gone berserk.

People who work in child care, especially those who work with babies and toddlers, may feel particularly pressured to be seen to be doing something worthwhile in parents' or the community's eyes, so they resort to compulsory group times or product oriented activities so there is something to take home to Mummy. I even heard of one centre where the under threes were making Christmas decorations! Now if that were handled in a child centred way, I am certain that invincible toddlers would hijack the activity and make it into something that suited them, but it is not a particularly appropriate activity for adults to plan for that age group.

Katz has a wonderful story in her book Engaging Children's Minds (1989). She writes of two children who are cutting out autumn leaves, which have been drawn on coloured paper by the teacher, on which they have been instructed to draw faces. These will be attached to icy pole sticks, and these puppets will become players in a play about autumn. One child says to the other something like, "You know, this is really dumb, but my mum will just love it". We need to ask ourselves why we are offering the experiences that we offer in programs for under three year olds. If the answer frequently is because the staff are bored, to please the parents, to impress the director, the adviser, or the management committee, instead of because they are developmentally, humanly, culturally, and uniquely appropriate for the children we work with, then something is wrong.

Gimmicky activities are often resorted to by adults to cope with their own boredom and lethargy, but they project that boredom onto the children to make it legitimate. The more we understand and are excited by children's development, the less we resort to experiences and materials that have only novelty value. More specifically, I would say that there is an inverse relationship between staff's understanding of toddlers' development and the number of products of so-called craft activities in the lockers for children to take home.

Babies and toddlers do not get bored with open materials that can be used in a variety of ways. What drives them to persevere, explore, and experiment are the real activities and materials used by people important to them. I saw a good example of this recently. A student offered finger paint to a group of two to three year olds, who were moderately interested. Some paint inevitably dropped on some of the chairs around the table, which were then put aside to wash. When the soap, water, and scrubbing brushes came out the children engaged more enthusiastically in the cleaning up than they had in the original activity. The cleaning up was a superior experience on all counts to the finger painting.

Children are eager to conform the older they get, so they will learn to like such inane and inappropriate activities as colouring in or stencils, or they will demand and appreciate an adult drawing for them or creating models to copy with clay, especially if they know nothing different. Consequently it is important from the beginning to encourage and support their own efforts.

Katz (1988) warns us that we cannot judge the worth of an experience simply by whether or not the children become involved. She writes:

> It is also important to realise that children are extremely eager to please adults and will willingly do mindless things. The fact that children enjoy doing something is not a reason for them to do it. Enjoyment is not a goal of education, it is a goal of entertainment. The goal of education is to engage the mind, whatever the age of the student. When we teach well, learning is enjoyable, but this is not the goal, it is a by-product.
>
> (p. 4)

## Programming Through the Environment

The best programs I have seen are ones where care has been taken to set up a rich environment, one that invites children to partake of materials and experiences that they have chosen. I do not mean necessarily a costly or luxurious environment, for some of the best programs I have seen have been offered in far less than opulent settings.

Greenman (1990) says that the program is the environment. The best programs for babies and toddlers happen where there is variety for children to select from, and the adults are free to support, assist, encourage, and have those all important interactions with children. Adult conducted experiences should form a relatively small proportion of the experiences available to the children.

## Being Partners with Parents

Early childhood staff have traditionally prided themselves on their close relationships with parents, and by and large we do a much better job than do our colleagues in primary and secondary schools. However, in the light of contemporary society and its impact on family life, we need to look critically at relationships with parents. We need to move away from measuring our parent participation in terms of the attendance at parent meetings, or the amount of money raised at fetes, or whether the management committee has its full complement of members. We need to move toward the establishment of a mutually supportive partnership, with open communication, respect, lack of judgment of each other, and good will. It is well documented in the literature about parent involvement in schools that what parents want is a relationship with the teacher, that is, with the person or persons who work closely with their child. I am certain that this is true for early childhood services as well, particularly those for children under three. And yet, by and large, the ways we devise for parents to be involved are more likely to give them a link to the institution than a direct means of forming a relationship with the people who work with their child. A parent-staff partnership in an early childhood setting is a matter of spirit, of attitude. It does not require huge time commitments, participation on committees, attendance at fund raising functions or meetings.

Linking what happens in the program and at home, open sharing both ways of information and concerns about and pleasure in the children, assisting sensitively with separation, parents feeling welcomed and valued partners in the program -- these things do not just automatically happen, but must be programmed for.

It is so easy to ignore, to criticise, to patronise, to undermine, to exploit parents. Quite specifically, I would suggest that it is highly unlikely that staff who believe that if possible, every mother should stay home with her baby or toddler, will develop a positive supportive relationship with mothers who have chosen to work for reasons other than financial necessity, and these attitudes should be explored in the process of hiring staff.

Rita Warren (1977) writes of the almost inevitable feelings that develop in early childhood professionals:

> For all of us who work with young children, the number one occupational hazard is a tendency toward "child-saving". Children are little and vulnerable and usually appealing, and it is all too easy to slide into seeing ourselves as new and better parents to the children in our care. ...We may too easily slip into seeing the child's parents as uncaring and unknowledgeable or judge them by harsh standards which do not take into account the parents' own needs and vulnerabilities.
>
> (pp. 8, 9)

Parents may get the blame but not the credit. What is the first thing most staff say when a toddler suddenly starts biting any exposed flesh she has access to or refuses to sleep or is distressed at separation: "I wonder if something's going on at home?" I have never heard an early childhood professional say first, in such circumstances, "I wonder if there's something about me or the program that's troubling her".

Early childhood professionals and parents are in a bind. While we advocate for higher standards and strive to present a professional image and provide quality experiences for children so that parents will feel secure leaving their children with us, we also want parents to be involved and to maintain their responsibility. One of our biggest challenges as early childhood professionals is nurturing and sustaining parents' beliefs that they in fact are the major influence on their child, that they are the child's most important person. A day care centre director said to me recently: "I try to ensure that my staff and I develop attachments to families, not just to children".

There is a danger that we are inadvertently pressuring parents into seeing themselves as needing to be bogus early childhood professionals rather than good parents. The challenge for early childhood professionals is to support parents in their child rearing role rather than seeing themselves as paid substitutes for parents and to try to influence Government policy and the design of services to reflect this philosophy. Unfortunately, at present our services are not funded in a way that allows priority to be given to partnerships with parents, so by default we find ourselves functioning more as second rate substitutes for parents than as supporters.

Caldwell (1984) has described child care in the following way:

> Professional child care is a comprehensive service to children and families which functions as a subsystem of the child rearing system and which supplements the care children receive from their families. Professional child care is not a substitute or a competitor for parental care. To some extent, professional child care represents a version of the extended family which has adapted to the social realities of the modern world.
>
> (p. 4)

### Attending to Our Own Professional Development

It is increasingly recognised that our practice with children will not be good if our own needs are not being met. The work environment of early childhood professionals, as well as the broader context in which we work, our salaries and working conditions, influence in a major way the quality of our work with children.

I have never seen a program of high quality for children where there was not a positive atmosphere for staff. I should add parenthetically, however, that the converse is not true. That is, adult centredness in programs does not automatically ensure child centredness. I have seen programs where the staff were having a great time but the children were not.

Professional development is a lifelong process. It involves participation in in-service education activities and engaging in further study, but it goes far beyond that. While ones own professional development must be motivated and directed from within, it can obviously be supported or impeded by the work place. There have been and to some extent still are a number of factors that impede professional development of early childhood professionals, particularly those who work in care settings. For those who work with very young children, there may be the additional factor of lack of valuing or recognition that what they are doing requires as much skill and sophistication as does working with older children. There are still those unenlightened people who believe that work with babies and toddlers is simpler and less demanding than work with older children. They have obviously never tried it!

We each need to look at ourselves periodically and reflect on our own professional development. We have all seen early childhood professionals who, it appears, have fossilised. That is, they have, in their view, all the answers, and there is nothing more, in their view, that they need to know. There are others who appear to have gone to sleep professionally, who appear to do the same things day after day, rather joylessly, on automatic.

We must advocate for conditions that facilitate our own growth and development. It is not just that we deserve it, children deserve it too.

## Conclusion

To finish, I want to go back to where I started, with the notion of good programs for babies and toddlers having features in common with good homes. A selective list of what that means from the child's view follows:

1. SOME PEOPLE ARE PERMANENT, ALTHOUGH THEY WILL NOT BE THERE ALL TIME, AND OTHER PEOPLE ARE IN AND OUT.

2. I AM KNOWN, MY LITTLE PECULIARITIES, LIKES AND DISLIKES ARE APPRECIATED OR AT LEAST TOLERATED. I AM TREATED AS SPECIAL, ACCEPTED AND VALUED AS A PARTNER.

   This applies to everyone, not just children. Home is where people, not just children, can be themselves. There is no one right or best way to work with children, and we have to be careful in professionalising our work that we do not homogenise and sterilise caring for babies and toddlers. Authenticity and integrity of activities and experiences were discussed previously. Those qualities must apply to human interactions between adults and children. I have known and worked with lively, animated, energetic talkative people who were excellent with babies and toddlers, and I have also known quiet, reserved, undemonstrative slow moving ones who were equally as good. Diversity is a strength.

3. I HAVE SOMETHING THAT IS MINE.

It may be just a photo, a face washer, a special place to sit for lunch, or a locker, but it is personal.

4. I CAN BE SOMETIMES ON MY OWN, SOMETIMES WITH OTHERS. I CAN GET AWAY TO HAVE SOME PEACE AND QUIET SOMETIMES WHEN I WANT TO.

5. WE COME TOGETHER SOMETIMES, BUT WE ARE OFTEN DOING "OUR OWN THING".

6. I FEEL SECURE HERE, I BELONG TO THE PLACE AND PEOPLE.

Appropriate rituals create a sense of group. Such practices as calling toddlers' attention to someone who is away, welcoming someone back, doing things together such as setting the table or putting things away, encouraging children to help and comfort one another are critical parts of the curriculum.

7. THERE IS A COMFORTABLE ROUTINE, BUT NOT REGIMENTATION. THE ROUTINE IS FLEXIBLE, IT VARIES. THERE ARE SOME CHANGES IN SPACE, MATERIALS, AND ROUTINE BUT THE EXPERIENCE IS PREDICTABLE ENOUGH TO GIVE FEELINGS OF SECURITY AND EMPOWERMENT.

Some child care centres run more to a schedule than many public transport systems. Most good homes do not. Confident workers with babies and toddlers will "loosen up" the time to the extent possible. They will think in terms of large "chunks" with a minimum of artificial breaks or empty times. They will view children doing different things at any one time as desirable rather than as a threat to their control.

8. THE ENVIRONMENT IS RICH AND THERE ARE LOTS OF OPPORTUNITIES TO INITIATE THINGS MYSELF. THERE ARE LOTS OF GOOD THINGS TO "MUCK AROUND WITH" LIKE TOILET ROLLS, POTS AND PANS, PLACES TO HIDE, THINGS TO FIT MYSELF INTO, SPACE TO PRACTICE MY LATEST ATHLETIC PURSUIT. THERE IS TIME TO DO MY OWN THING.

THERE ARE LOTS OF TIMES WHEN I AM LEFT ALONE TO CHOOSE WHAT TO DO IN A RICH ENVIRONMENT, WITH PEOPLE ACCESSIBLE TO HELP, SUPPORT, GIVE A CUDDLE, MAKE SUGGESTIONS, AND GIVE ENCOURAGEMENT. I AM NOT UNNECESSARILY INTERRUPTED OR "PROGRAMMED".

Escalona (1974) writes the following about the tempo of toddlers:

> By and large, toddlers have a hard time fitting their rhythm to that of the caretaking adult in the group -- far more so than in the family where, as the adult does his work, the toddler is allowed to busy himself as long as he does not cause trouble or get into danger.
>
> (p. 36)

9. THERE ARE A VARIETY OF PLACES TO GO WITHIN THE SPACE.

10. SOMETIMES WE STAY AT HOME, SOMETIMES WE GO OUT.

11. THIS PLACE IS COMFORTABLY MESSY.

12. WE DO THINGS BECAUSE THEY ARE INHERENTLY INTERESTING OR BECAUSE THEY NEED TO BE DONE. WE LEARN THINGS AND DO THINGS FOR A REASON OR PURPOSE. PEOPLE DO NOT TALK IN ORDER TO PROVIDE VERBAL STIMULATION BUT BECAUSE THEY HAVE SOMETHING TO SAY.

13. THE ADULTS ARE THERE BECAUSE THEY WANT TO BE.

There are fewer people in the world who can do a good job with babies and toddlers than with over threes. It would be hoped that centres would be staffed with people who want to be there and for the right reasons.

Curry and Johnson (1990) write about the need for adults to act in collaboration with children:

> Children need coaches -- adults who realise the full implications of their efforts on the child's developing sense of self, and act accordingly -- rather than cheerleaders. ... At the heart of coaching skills is finding goodness of fit between adults and children.
>
> (pp. 92, 93)

Robert Frost wrote "Home is the place where, when you have to go there, they have to take you in" (Lathem, 1969, p. 39). With regard to early childhood programs, I would hope for substantially more than that for babies and toddlers and their parents, and for that matter for staff in those programs. I would hope that they would want to go there and they want to take you in!

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# THE IMPACT OF CHANGE - AGAINST THE ODDS

Paper presented by Clare Wells to the Early Childhood
Convention, Dunedin September 1991

Tena koutou
Nga mihi mahana kia koutou
E nga mana, e nga iwi, e nga reo
Tena koutou, tena koutou, tena koutou katoa

I am very pleased to have the opportunity to speak to the Convention about the Impact Of Change. My experience and therefore my perspective, is as a worker in the early childhood sector, and I intend to focus on changes that have affected those working in the childcare and kindergarten services.

To set the scene, I believe it important to look briefly at broader social and economic policies and influences - the role of women in society, their employment needs and the value placed on the work they do. It is within this context that the provision of early childhood education is viewed, and the response towards those who provide it.

Traditionally, women have been viewed as taking a caring role in society - caring for children, the elderly, the sick and so on - 'it is a natural instinct'. To a large degree, this attitude has been reinforced, with the most significant demonstration being that of employment equity - the value placed on the work of women. This value translates to pay and employment conditions and the attitude society holds generally about the nature of the work women undertake.

To quote from the Royal Commission on Social Policy

1 - *Today most women are primarily members of the paid workforce, who take time out for child bearing and child rearing, and other caring work. Even at those times ... they are doing unwaged work in the household and often in the community ... This unwaged work is not an 'optional extra'. Society needs it so all other human activities can take place ... Economists have suggested that in developed countries the value (of unwaged work) could be equivalent to at least 30-40% of the gross national product.*

Although the Royal Commission findings place a high degree of economic importance on women and the work they do, and acknowledge their role in society as being in a 'caring' role - are still seen as being there because they like it, 'it's natural' and that it is something women would do anyway - whether they were paid or unpaid.

For years women have undertaken the task of changing this attitude. The task has been approached from many angles, but two significant approaches have come from the employment needs of women and from the 'revaluing' of the work undertaken by women in 'caring' occupations.

The employment needs of women are largely attributed to the nature and expectations of the work they do, the responsibilities women has outside working hours, and the growing trend of women being the sole income earner.

The revaluing of women's work has arisen from the shift - albeit minimal - in recognition of the social and economic contribution made by 50% of the population.

Although the theory and reality of employment equity is an interesting and topical subject, I do not intend to explore it further, but it does form a strategic part of the overall picture of womens economic and social contribution, and relates closely to the attitude and therefore the position, of those working in the early childhood sector.

As the move towards recognition becomes more widely accepted, so to does the development and provision of services and requirements to meet those needs.

Politically, these issues have been bandied around the corridors of power for years, and have resulted in some changes in support of the arguements. For example, the introduction of the Parental Leave Act; industrial, and health and safety regulation; and of course the recent example and the most short lived piece of legislation in history, the Employment Equity Act. Against the Odds, the political maneouvering achieved some success.

Political 'interference' - as is the view of some commentators - cannot achieve the 'flexibilities' required - particularly in relation to the labour market. 'Centralisation' and 'bureaucratic control' - it is argued - leads in fact to excessive restrictions to the detriment of economic gain. However, without the centralised approach via legislation and regulation - so history documents - neither success nor a change in attitude, would have been achieved.

It is against this backdrop, that the impact of change for workers in the early childhood sector can be seen most clearly.

The development of services, although not restricted by any means to the early childhood sector, did see a rapid growth in recent years. The provision of early childhood services was seen as desirable objective for a range of reasons as well as being regarded as an employment issue.

If people are to participate in paid employment, they need a service which meets their needs and the needs of their child. And although there has long been many informal arrangements and the provision of services such as kindergartens, playcentres, etc., these only met in part, the demand for services which enable parents/caregivers the opportunity to participate in long term and full time employment.

The increase in the demand for childcare services, has grown steadily - most notably during the past 10 years. This happened at the same time as the attitude of society towards childcare gradually changed to become more accepting, as the role of women economically and socially came to the forefront of the political agenda, and as the employment needs of women gained recognition.

This change in attitude, mainly due to the intense political and public lobby, further raised the awareness of not only the need for early childhood services, but also the benefits of quality provision. As we all know, the benefits are documented far and wide. However, the 'natural instinct' theory still pervades, and it has created a myth that still exists in many quarters. The myth that early childhood education and early childhood care are two separate issues.

Although the provision of full time, long term early childhood care and education did not fit well with the more traditional and persistant attitudes, the increasing demand for services - for whatever reason - fostered the perception that childcare had a custodial rather than educational role. Against the Odds, the myth has been dispelled - although not completely.

If the two are in fact inseparable and education holds a 'higher status' than care - such is the fickle theory of some - then to discuss early childhood in an educational context raises the issue of government responsibility, and in turn suggests a cost.

This is the rational of government advisors who tried to steer the government away from accepting responsibility and tried to keep the myths alive.

A graphic illustration of this, is documented in the briefing papers to government from Treasury in 1987, which state

*2 - That children who attend the various forms of early childhood institutions are far too young to appreciate the longer term benefits and costs of the education and care ... they receive*

The paper consistently raises the custodial versus educational role of services reinforcing the myth in the minds of the decision makers, and raises the question of the amount of government involvement and the need for regulation. It also notes the voluntary contribution within the sector, the interests of 'private' providers, and it challenges the evidence relating to the benefits of early childhood education, saying

2 - *The debate ... tends to be emotive and can at times generate more heat than light ... there is still little objective evidence of the long term effects ... which lead to assertions ... based on intuitive judgement and over extending the application of (available) research data.*

Treasury does however concede that

2 - *The first few years in a child's life are crucial for their subsequent development*

and goes on to state

2 - *The main issue (in relation to early childhood) ... is the balance between institutionalised provision and family care*

As the arguement came forth from Treasury in the mid 1980's, the 'emotive' debate did succeed in applying the 'heat' to government. Many of Treasurys arguements - Against the Odds - did not win favour at the end of the day, much to their chagrin.

During this time, the shift from the custodial to educational role of early childhood accelerated, most noticeably with the transfer of administration and monitoring of childcare services from the Department of Social Welfare to the Department of Education. As the debate became more public, so to did the expectations on those who provide it.

Having established - well more so than in the past - that early childhood education is a valued and important part of society, the focus then centred on quality and a new debate emerged.

There is a consensus amoung educationalists that the provision of quality early childhood education relies on a number of factors, which include skilled and experienced staff, good staff:child ratios, appropriate group size, developmentally sound programmes, and recognition of both the employment and professional needs of those working in the sector.

Early childhood may have reached a turning point, but validation of what constituted quality provision was not reflected beyond the rhetoric. The myth prevailed and did not rest easy with the expectations for quality.

As the recognition of early childhood education increased so to did the comparisons between what was being offered and therefore what was being gained within the sector. The kindergarten movement as the most long standing 'formal' service was seen - and still is - as being better off than anyone else. The successes achieved in the kindergarten service were only realised after a hundred years and the acceptance that early childhood did, in fact, belong in the mainstream education sector. Nothing fell into the 'lap' of the kindergarten service from generous benefactors - it was hard fought for and hard won Against the Odds.

As a consequence many of the provisions available to education across the board were also made available to the kindergarten service. Kindergarten teachers were the first in the early childhood sector to undertake pre-service training provided by the government, and to be paid directly by government. As such, this group was included in the 'state sector' and thereby subject to state sector regulation and conditions of employment. As 'state sector employees', kindergarten teachers assumed many employment conditions that were won as part of a state wide claim. With training requirements and employment conditions being of a national standard and application, and with kindergarten teachers being accepted as part of the state which included policy development, kindergarten teachers were able to move forward as a national collective group in the interests of quality early childhood education and in the interests of those who provided it within the kindergarten movement.

For childcare workers, the history is quite different. Childcare workers were employed in a variety of centres under various employment conditions, with a range of qualifications and experience. Childcare was seen as being a purely private sector operation, and although government had some responsibility, it was definitely not in the area of employment conditions.

Minimal requirements set out in legislation, regulation and policy, were subjected to broad interpretation, which in turn directly affected the nature of the work undertaken and the environment in which it took place. Although recognition of the work status and employment needs of women, and the need for quality provision of services was gradually becoming acceptable, in a women dominated occupation, the inequities were particularly startling. And although there were many who did work to address these inequities, there were equal numbers who did not, and there are dozens of examples available of the conditions workers, and children they were responsible for, were subjected to - workers being paid $1.80 per hour, poor supervision of children, no formal agreements regarding pay and conditions, no sick leave, long hours without a break, and so on - and this was less than 10 years ago.

It was Against the Odds then, of a wage freeze, isolation, exploitation, intimidation and employer resistance, that childcare workers achieved union representation and legally binding employment conditions.

Even though industrially workers were represented on a collective basis and had gained protections under an Award document, the variation continued, and given that we are speaking of only six years ago at this point, the fact that wage rates ranged from $4.25 per hour to $5.28 per hour for a first year untrained worker, this variation is an example of the reality of employment equity, and the status of women and of the childcare service.

As public awareness grew for the continued provision of quality early childhood education services, so to did the arguement against recognition. Treasury picked up on the theme and commented that

2 - *Early childhood services have been a matter of public interest and concern for many years ... (and) in recent years, public interest has been increasing. Pressure for the allocation of additional public resources to early childhood services is coming from a number of directions.*

Treasury had noted that early childhood education was a significant employment issue as well as an educational one, and therefore the community of interest in this provision extended far beyond the early childhood sector. This factor, anticipated Treasury, would play a significant role in the political debate and as such, ran the risk of being acceptable. Treasury's comment was quite true, and they knew the fiscal implications should the government concede to pressure.

Alongside of this, there was the progressive move towards deregulation , devolution and privatisation. The move towards reduced government intervention and the application of market forces. It seemed to Treasury and other government agencies, that this growing trend was in fact being negated in the early childhood sector, with government policies reflecting an increased centralised approach. For those holding the purse strings, this was an alarming trend.

The lobby for early childhood continued and the call for more government responsibility and intervention increased. At the same time there was another strand of policy making in the offing which would result primarily in government reducing its role in state affairs in relation to employment.

In 1987, all workers whether in the state or private sector came under one piece of legislation - the Labour Relations Act - and for kindergarten teachers the added bonus of the State Sector Act. This substantially altered the method and requirements of industrial negotiation and the representation of workers in the process. Childcare workers had Award coverage - kindergarten teachers did not. The legislation required kindergarten teachers to codify their employment conditions into an Award document and required their representative body - the Kindergarten Teachers Association - to become registered as an industrial union. It removed the ability for a sector wide approach and left kindergarten teachers out on their own. The State Sector Act also required employers to be good employers and set the ground rules for employers to follow. Needless to say, these rules paralled closely those already established in the private sector.

Employers and workers operating in the private and state sectors were covered broadly by the same legal provisions. From a Treasury point of view this would no doubt lead to the acceptance by government that they no longer had a responsibility in industrial matters of the state - a point of view fostered and nurtured by those favouring the market approach. If this view does not succeed in one area of policy making, history documents it being relitigated in another.

Another player in industrial negotiations in relation to the kindergarten sector, was the State Services Commission (SSC). Although the SSC had always had a hand in industrial matters, their role was in conjunction with the Department of Education and not directly as advocate on behalf of government. Under the State Sector Act, the SSC took on the responsibility as advocate and the legislation reduced the involvement of the Department of Education in negotiations. However, SSC's interest went beyond industrial matters into the arena of educational policy, and at a time when both educational and industrial policies were changing, the SSC made sure it was involved in both. SSC had an ally in Treasury and together they challenged the government and relitigated the myths in a effort to save the public purse.

One of the key areas of new policy around this time was the shift to implement the three year early childhood education pre-service training. Against the Odds, this policy won favour with the government and the staged implementation was set to begin in 1988, replacing the one and two year childcare and kindergarten training programmes.

Treasury commented on this policy change as following

2 - ... *an increasing trend of professionalism ... which may have costs as well as benefit ... The costs of*

*professionalism can be such that they exceed the benefits gained.*

Treasury was stating quite overtly, that one of the key areas in the provision of quality early childhood education, that of training, should be regarded as an economic rather than educational consideration. By applying economic considerations, Treasury was denying the level of skill, responsibility and experience needed in the sector, relitigating that early childhood education was primarily a caring, custodial role and that those who provide it, naturally have the skills to do so.

In 1987 also, the government attempted to straddle the balance between government intervention and responsibility, and community empowerment - appeasing the critics of government control at the same time as appeasing the advocates for public provision of social services. A flurry of activity to refom education, welfare and health services took place with indecent haste, under the watchful eye and guidance of government advisors and private sector interests.

Against the Odds, the development of early childhood policies continued and was realised in 1988, with the release of Education To Be More. This report acknowledged the benefits of quality early childhood education and set out strategies to ensure quality provision would be available in the future.

The report was largely accepted by government and resulted in new policies being developed via the Before Five document. One significant omission in the policy document which was an initial recommendation of Education To Be More, was the loss of the partnership requirement - the requirement for workers, parents and management to work together in decision making.

Before Five established a flurry of activity as working groups were established to refine, finalise and implement the new policies.

Although the acceptance and implementation of these policies confirmed the desire and objectives for quality provision, they also served to streamline the requirements for all early childhood services. For a policy that originated in the celebration of diversity and flexibility within the sector, it in fact reduced the unique nature and diversity within the early childhood community. Although not the intention, outside influences saw this be the case. For the kindergarten service, the policy change was telling.

I recall a Treasury offical commenting to me at this time, that kindergartens won't be around in two years time. Policies that applied to all and the inequities - particularly with regard to funding - that existed, created a furtile ground to win the arguement for a reduction in government intervention - after all government had a minimal role in relation to other services, why should the kindergarten service be any different.

It was Against the Odds then, that government increased funding to all early childhood services in 1989. Although the myth prevailed amoung the decision makers, government conceded to implement a staged process for increased funding to all early childhood services over the next five years.

This being the case, government had accepted the need for increased funding to support its policies. However it did not clearly state its objectives for the funding, except to say it was to provide for quality outcomes. An accepted definition of what the quality factors were, was absent.

Establishing the intention of the funding met with the most resistance within the context of industrial negotiation. The increased pressure on government to remove itself from the industrial arena meant that arguements to improve the conditions of workers, particularly in the childcare sector, were difficult to maintain. Against the Odds, the arguements were supported by a number of employers, but for some they were not. Overall there were improvements with training assistance and opportunity, in conditions of service and in wages, but the variation continued dependant on the level of commitment and the interpretation of what constituted quality. The opportunity to address the empolyment inequities within the sector was present, but at the end of the day, the inequities were reaffirmed.

Within the kindergarten service, things were taking a different turn. The SSC was heading towards setting in place comparable requirements for kindergarten teachers, and establishing the rights and powers of employers to manage in much the same way as in the private sector. Devolution and local arrangements were the catch cry of the time and any advance to remove government responsibility could only be an advantage to a government looking for cost constraint.

Although the kindergarten service was subject to the same educational, administrative and employment processes as the rest of the sector, it managed to retain a number of policies that were peculiar to its operation, and furthermore, managed to retain a degree of government responsibility. History showed that the involvement of government provided strong arguements which resulted in a number of achievements and also kept early childhood on the agenda as education. This factor was the motivation for Treasury and other government advisors to reduce the level of responsibility to the lowest common denominator, noting that if government had a responsibility there would be a cost and there was always the risk of political pressure. Furthermore, there were the additional features for the kindergarten service of the direct payment of teachers salaries by government, the central, national negotiation of employment conditions and the recent requirement of compulsory teacher registration. These three areas implied direct government responsibility.

At this time, training had also become an issue of intense interest in relation to the three year traning policy being implemented and to the objectives stated as part of the new policies to achieve a standard requirement. The development and implementation of the equivalency proposals dismayed government advisors. The costs, rational and benefits were constantly bought to the attention of the decision makers. However, Against the Odds a system was set in place.

1990 - election year - and in the early childhood sector, the turmoil and disruption was beginning to settle down, and the anticipated growth and development of quality early childhood education was becoming a reality.

It was not long however, before the vision was shattered, with the announcement of a review in government policy, and the serious economic crisis.

In Decemeber 1990, the newly elected National government established the means of dismantling the achievements so recently gained. Relitigation of many of the old arguements was rampant and as it has turned out, won favour.

As well as announcements of reviews in every area of education and in a number of other social policy areas, there was also the complete removal of industrial policies and the establishment of a deregulated industrial environment, said to offer choice and flexibility, without the interference of Unions. The removal of existing industrial relations policies signalled the opportunity available for employers and workers to negotiate individually. Given that this legislation was introduced in the context of the pressure to reduce government intervention and to cap expenditure, it is nothing short of an attempt to divide and rule, and reduce employment conditions. The Employment Contracts Act will have the effect of returning workers in the early childhood sector to the conditions of the past - and we have seen it beginning to take effect. Against the Odds - after hard won battles for the recognition of protection of employment conditions, particularly as they affect women - the new government dismissed the evidence in favour of arguements touted by its advisors and predominantly, by the private sector business community.

The opportunities under the Employment Contracts Act have been expounded far and wide, and the influences on government as a result of its review processes and findings, indicate a move back to days gone by. And Treasury provided arguements to support the move stating in their Briefing Papers to the Incoming Government in 1990, that

3 - ... *tight regulation of premises, equipment and staff ... drives up cost ... Tightening regulations on the qualifications of staff is likely to reduce the role of volunteers and have a substantial influence on cost and availability ...many of the existing regulations are likely to raise the pay of staff.*

As part of the review process the SSC further submitted that they have

4 - ... *serious reservations (with regard to the equivalency policy) ... because it has a potential to pose significant fiscal risks ... (it) does not recognise the industrial ramifications*

And the SSC expand on their reservations noting the

4 - ... *substantial ... downstream pressures on the wage bill ... that the policy ... deemed to be equivalent to kindergarten teachers should create expectations for pay parity ... (it) gives industrial arguements to the Union, and makes it that much more difficult to retain costs.*

Governments advisors also turned their arguements, in an effort to make them more acceptable, towards that of helping those those can't help themselves, and resulted in the re-emergence of targetting and user pays theories. These theories, linked with the acceptance of reduced government intervention and responsibility, and the desire to reduce overall cost, serves to corrode the policy in early childhood, and for the kindergarten service, seeks to reverse the original policy and have the kindergarten service become identical to that of other services at the level of the lowest common denominator.

The review of funding to early childhood highlights this quite openly stating that

5 - ... *a model of mixed targeting and universal funding ... meets governments objectives*

However, the review team notes that in order for this model to be 'fair and efficient' a redistribution of funding would have to be made. The first part of this move is to reduce the funding to under two centres, and the second is

5 - ... *reducing the subsidy for kindergarten (which) will involve a move to purely bulk funding*

As we have seen as a result of the very recent government Budget, the policies set in place to enable quality early

childhood education have been at best challenged, and at worst, an attempt to undermine all that has been achieved. Against the Odds - the establishment of new policies, the weight of public support and the acknowledgement of the benefits of quality early childhood education both in a social and economic context - the government has ignored the evidence and intends to keep early childhood in its place.
In conclusion, the fact that I have concentrated on the influences of government policy, by no means undermines or reduces the substantial moves made in programme and curriculum development, biculturalism, mainstreaming and equity issues.

What I have presented, highlights the need to be aware of the influences on, and manipulation of, early childhood education. We should not be fooled into complacency or acceptance.

Whether we like it or not, early childhood education is a political issue, and we are subject to the whims of political advisors and commentatorsnow, more than ever. The agenda is set, and the objectives quite clear.

The reduction in funding, the effects of the Employment Contracts Act, the changes to training requirements, the removal of registration, the shift towards bulk funding are examples of how government advisors will achieve their stated objectives. One educational theorist recently suggested that governments moves serve to remove all responsibility from the state and create a marketised education system, and further served to drive women back into the home.

The impact of change on workers in the early childhood sector, both professionally and industrially, has been enormous. Working to change policies in the first place, to develop appropriate and equitable outcomes, and to assert the importance and value of the work we do has been undertaken by a very strong and determined group - of women mostly. Against the Odds of free market economic theory and the arguements put forward by the private sector for more autonomy, control and flexibility, early childhood education looks as if it has come full circle in the past 10 years and the commitment of those who provide it has become somewhat tenuous. The reassuring aspect however, is that the commitment does exist, and for my part, understanding and acknowledging the influences on us as workers in early childhood may provide a temporary set-back, but knowing what we do, and experiencing the realities and benefits of sound educational and employment policies, we will have the energy to carry on to achieve goals so recently within our grasp.

No reira
Tena koutou, tena koutou, tena koutou katoa.

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# AFTER-DINNER SPEECH TO FIFTH EARLY CHILDHOOD CONVENTION, DUNEDIN TOWN HALL, SEPTEMBER 10, 1991

Mary Varnham

I don't suppose there are too many people who are invited to give an after-dinner speech to a group of people on the basis of having poked the borax at some of them in a newspaper column.

Some of you will know that I wrote a column in the *Evening Post* in June. The *Evening Post* sub-editors titled it "For childcare parents: trial by Charter". Not a bad title, although I would have probably called it "torture by Charter" since trial suggests some sort of orderly process. The charter process was not orderly.

The column was based on the experiences of parents at my children's childcare centre, Polyhigh. I wanted to name it "Who killed Laura Lambie?", after a parent who volunteered in October 1989 to head up our charter writing group. A year and a half later the only way she could escape was not by dying (thank goodness) but by getting pregnant and disappearing into Wellington Women's Hospital.

I came into the process rather later in the piece. I kept seeing these haggard looking parents slumping into corners all over the place, collapsing into the sandpit, burying themselves up to the neck in playdough. And when I asked them what was wrong they could only moan pitifully words like "charter" and "Lockwood Smith". Actually, moan is an extremely polite way of describing their attitude.

To ease their suffering I cheerfully said not to worry, I was a writer, I'd take the charter over and finish it. And I sat down one night with all the material - the guidelines, the handbooks, the letters from us to the Ministry, the letters to the Ministry from us, the drafts and altered drafts, and altered drafts of the altered drafts, the old instructions and new instructions. And I could not believe the sheer political and bureaucratic incompetence of it all. And behind it the apparent belief that parents had endless amounts of spare time with nothing better to do with it than produce endless drafts of charters - under threat, of course, of losing funding for their centres if they didn't comply.

Fortunately I didn't have to get pregnant to escape. I was lucky enough to be able to vent my feelings in the newspaper column I write. I really wrote the column for the sake of the parents at Polyhigh who'd endured the charter writing process. I thought about half a dozen people would understand what I was on about. To my amazement I had a huge response to the column, not just from childcare parents and workers but from people in all parts of the education system who were similarly aggravated by what was going on.

So when Pat Irvine asked me to speak here tonight I thought it was probably going to be a form of punishment, but I must say that so far it's been remarkably unpunishing. I even had the chance this afternoon to act as dominatrix to a couple of members of parliament and that was most enjoyable.

But I must admit when I first heard from Pat I thought the conference organisers must have mistaken me for Bill Ralston or Andy Haden, or one of those other illustrious after-dinner speakers who swan round the country in Stretch limousines, charging people thousands of dollars for the privilege of being shouted at in irascible tones.

But when they told me the fee I knew it must be me. They even asked me to hitchhike down and stay in a youth hostel. Times are tough but this is the first after-dinner speech I've ever given. It's very good of you to have all come along here tonight to audition for the part of the audience. You're doing very well so far. Please keep it up.

This has been a year of firsts for me. I did my first celebrity debate a few weeks ago. A celebrity, by the way, is a person who is famous for being famous. I mean, does anyone know what Gary McCormick actually does?

Celebrities are also, as I discovered, people who can tell appallingly bad jokes, truly dismal jokes, and still make people laugh. I'm going to be trying to achieve celebrity status tonight.

I'm told you have to have jokes in after-dinner speeches and I've got one prepared: How many ministers of education does it take to wallpaper a room? It depends how thinly you slice them.

But to get back to the debate, it was a terrifying experience. You sit up on there on funny little chairs and tell yourself that it hasn't been well advertised, nobody knows about it, hardly anyone will turn up - and suddenly you look around and there's not an empty seat in the house. There are people sitting on the floor. There are people sitting two abreast on arm rests. There are people hanging from the overhead light fittings.

I now know how Gilbert Myles and Hamish McIntyre must have felt in a National party caucus meeting. And all the speakers ahead of me were hysterically funny - David Lange, Pam Corkery, Denis Welch - hilarious types, cracking one joke after another, slagging off at politicians. It was almost as exciting as being at a Kelburn dinner party.

And I was sitting there rubbing my shoes together to polish them under the seat and laughing my head off and I suddenly thought, Why am I laughing - I'm next!

It was like the feeling you have when you're pregnant - which for any of you out there who don't know is the process during which human capital resources maximising normally non-subsidised work units are developed for full and active participation in the free labour market.

When you're pregnant you naturally bask about in a time of wonder trying to emulate a Lux soap advertisement from the '60s with a negligee and a budgie. And then suddenly one day the terrible truth hits you - the baby has to get out somehow! And it's too late - there's no going back. That's how I felt. It's me next - there's no escape.

It's a funny thing, fear. Joan Rivers - an American comedian I like a lot - wrote a book called "Having a Baby Can Be a Scream". Good title. In one of her one-woman shows she talked about the definition of courage (and you might spot the fact that I've changed this a little to add local interest). She said, "Give a soldier a gun and tell him to go out and kill people. Is that courage? No! Give a boy a rugby ball and have him bend over in a huddle with a whole lot of other men and try and kick it through their legs? Is that courage? No!"

"I'll tell you what courage is", Joan Rivers said. "Courage is making an appointment to see the gynaecologist - and showing up". After that she had a searing description of what women have to endure during a gynaecological examination, but I'll leave that out in case there's anyone here from the Concerned Citizen's Association or The Colour Purple Scanning Society, whose honorary patron is none other than our own minister of education Lockwood Smith.

Lockwood Smith has just been visiting Malaysia. Apparently he went to see what penalties he could come up with for people caught smuggling 150 grams or more of Alice Walker novels into the country. After Dr Smith read "The Colour Purple", he faxed the purple passages to journalists around the country. Exciting times. I rushed out and bought a fax machine and waited for Dr Smith's faxes to arrive. Nothing. Dr Smith has yet to communicate with me.

The subject of the debate was that money is the root of all education. I was on the negative side. By the way, to digress still further, our team would definitely have won if we hadn't had Tom Scott. Tom is a wonderful, warm, furry person, but when it comes to debates he's a disaster.

He told a story about his kids in the morning, just off to school, saying: Dad, quick, give us $400, we've got to have $400 dollars. What do you need it for? Honestly Dad, we're going to miss the bus. If we don't get to school soon and buy the dope, the teachers'll get it all.

Well, that more or less proved the other side's argument, that money is the root of all education. And certainly that is undoubtedly the point of view of the people who are now in charge of the education system in the sense of providing economic advice.

I refer of course to the hand-turned Italian wine rack and marble skating rink set at No. 1 The Terrace. Wellington, by the way, for those of you who haven't been there for a while, is getting a distinctly Romanesque appearance. Gibbons may have to be disinterred to write The Decline and Fall of Lambton Quay.

Not only have we got all this public service marble, but the SOEs are into it too. Across the road from parliament, in front of Electricorp House, we now have a $2 million mini-colosseum for Electricorp employees to munch their sandwiches in. I'm expecting Jim Bolger to start appearing at caucus meeting in a toga: "Et tu, Gilbert?"

I have long been fascinated by Treasury's views on early childhood education. In 1984 Treasury didn't seem to be too interested in early childhood education - it didn't even mention the subject in its briefing papers to the incoming Labour government.

This was probably because Treasury believes that "demand for education is substantially derived from the need to acquire labour market skills" and it hadn't occurred to them yet that pre-school children could make a useful contribution to the economy.

We were talking about this recently at my children's childcare centre because if the government switches entirely to a user subsidy system with no bulk funding to centres, it's going to be hard for centres to stay afloat financially. (I don't need to tell anyone here that.)

And we thought that perhaps we could get the children to make persian rugs, or assemble transistor radios or go up chimneys. ChildCorp. Someone suggested pickpocketing could be brought back. We could have Fagan Enterprises.

I am indebted to Phillida Bunkle meanwhile for the following little nugget on Treasury thinking about childcare funding which appeared in one of their reports.

"The question of equitable access to childcare for working mothers", Treasury says, "is essentially one of public policy - whether affirmative action is required to assist the life chances of women".

Well, we could all agree with that. But they go on -

"The assumption is not just that the benefits of child-rearing do not compensate for the disadvantages in terms of loss of external work and educational opportunities, but that the public has an obligation to compensate for that net disadvantage from what would be (without the compensation) the result of an irrational desire to have children."

"Or, in the case of unplanned children, that the public should compensate parents for the unexpected net loss."

Well, I've heard children called a lot of things in my life, and I've called them a few things myself, but "results of irrational desires" and "unexpected net losses" would have to be a bit of a world beater.

Who writes this stuff? Are they human beings? Should they be allowed out?

There seem to be two keys to understanding Treasury's irritable and anachronistic approach to pre-school education. The first is their belief that education is a private good, not a public good. In their report to the Minister of Finance on the Meade report in September '88, they stated:

"We are less optimistic than the working group about the extent of benefits [of early childhood education] to society as a whole. Most benefits would seem to accrue to the children themselves and their families and thus the case for higher general subsidies seems rather weak."

Fortunately the Labour Government took no notice of this odd statement, which has been refuted not only by many studies but also by common sense and ordinary observation, two qualities that don't seem to be held in very great esteem by free market theorists.

The second of Treasury's blind spots is its sophomorish belief that the law of supply and demand can be applied to absolutely everything. If people demand childcare, it will be supplied - and at a price they can afford. If they can't pay the price, they don't really want it enough.

This is a pretty crude summation because Treasury's ideas are inevitably trapped in such a tangled mass of verbiage that coming to grips with them is like trying to comb out a hawthorne hedge.

There is a person in Treasury whose job is just to "translate" Treasury jargon into words that cabinet ministers can understand.

Anyone but Treasury can see that the need for childcare is usually inversely proportional to ability to pay for it. The people who need it most are the people who can afford it least.

Treasury has, from time to time, grudgingly accepted that - for example, in its 1990 briefing papers to the incoming government. (From devoting no space to childcare in 1984 it devoted a whole page in 1990 - this increased attention is a worry.)

And its answers to the problem of how to make it affordable are carbon copies of the answers that are being applied in all other social sectors -

1. Keep wages down. Treasury could hardly contain its indignation at the idea that early childhood workers might get better pay: "Many of the existing regulations are likely to raise the pay of preschool staff, largely at the expense of their clients and the taxpayer."

   (Has anyone else noticed, by the way, that more and more the idea is being put about that our taxes aren't supposed to pay for anything? I always thought we paid taxes for social services like health and education, and security services such as police and the army.

   But if, as is increasingly happening, we pay for these things on top of taxes, what are the taxes for? I'm expecting soon to get a letter from the police saying they'll only protect our street if we pay $1000 a year, or $500 if you've got a Kiwi Card.)

2. Answer No. 2: Use untrained staff or, better still, volunteers - and not just to write charters. Treasury stated this unequivocably in its 1990 briefing papers: "Tightening regulations on the qualifications of staff is likely to reduce the role of volunteers . . ."

   As a parent of three children with, so far, nine years' continuous involvement in childcare, I am undoubtedly better qualified than anyone in Treasury on the subject - and I have to say that the longer I'm involved in childcare, the more convinced I am that trained staff are vital for quality childcare.

There seems to be a disturbing attitude on the part of Treasury towards childcare as something anyone can do. Or, more specifically, as something which should really be done by women for nothing. I am always deeply suspicious when I hear the word "volunteer" issue from the lips of an economist. Nine times out of ten the words "unpaid woman" should be substituted. But of course if you try to make this substitution you will probably be told you're being emotive. It is more "neutral" to talk about volunteers.

What is going on here? What do the free marketers really think about early childhood education? If their ideas are adopted - and there is every sign they are - what will happen?

I would argue that their view owes more to the 1950s than to the 1990s. I would argue that they see early childhood care and education as economically unsound. It is better, especially in a recession, for women to stay at home and look after the kids. The state doesn't have to contribute to the cost of childcare, the mothers don't take up jobs that others can do and the net effect on the children is the same - or better.

They are prepared to make an exception for what they call in their 1990 papers "disadvantaged" children. But they haven't got a lot of time for early childhood education otherwise. "Our understanding of the research literature is that for most children the social and educational advantages of attending early childhood services are not particularly significant in comparison with home care."

What an absolutely ludicrous statement. You almost have to admire the applomb with which they dismiss the entire history of early childhood education and every known fact about child development, not to mention two centuries of struggles for women's rights, studies by criminologists, numerous government reports and good old human experience.

As a parent I find it deeply disturbing that these sorts of statements are being used to push an economic viewpoint under the guise of educational expertise.

In my calmer moments I sometimes ponder what books these people read. I imagine Lesley Max's "Children: Endangered Species?" would be pretty high up the list. I found this book interesting and can agree with a lot of what Lesley Max has to say. But, lamentably, her views on childcare are highly questionable.

When she says of staff in childcare centres: "They might do better than an angry disaffected mother but they surely can't be expected to provide for a small child what a loving and competent mother would", I could not agree less. For nine years I have observed first-hand, staff in childcare centres doing just that. Our family has been able to survive as a group of happy, cooperative individuals and I have been able to follow my career and ultimately to stand here tonight and give this speech because of their efforts.

But the glorious motherhood myth dies hard - the idea that anyone can be a "good" mother if only they are taught how. And good mothers are the ones who stay home with their kids. The last time this idea was being actively pushed was in the '50s when women had to be persuaded to give up the jobs they had taken up in the war and return home.

I am deeply suspicious of a scheme like Parents as First Teachers. What is it trying to achieve? If it is trying to help the learning and development of preschool children, why not do this by helping them attend an early childhood centre, Kohanga Reo or Pacific Island language group? Why not create more incentives for such places to be set up where they don't exist. A million dollars was allocated in the Budget to pilot Parents as First Teachers. It's not a vast amount of money but it would have helped set up quite a few urgently needed childcare centres.

Why not help mothers by taking the children off their hands for a few hours every day and at the same time giving their children quality care and education? I can honestly say I have never met a mother, no matter how loving and competent, who doesn't want more time to pursue her own interests.

I recently launched a report produced by the Society for Research on Women on motherhood over 30, and the most memorable thing that emerged from their research was that women - almost without exception - wanted more time for themselves, not only to pursue their interests and careers but to preserve their health and sanity.

I am cynical enough to bet that if we woke up tomorrow and found New Zealand had suddenly had a dramatic economic reversal, business was booming and there was a shortage of labour, Dr Smith and the Treasury would just as suddenly find other theories and ideologies they liked better, theories which showed that children were much better off in pre-school centres away from the home, that the home environment was as desirable as tooth decay and that loving and competent mothers were far too likely to smother their children and wreck the national economy into the bargain.

Cynical manipulation of women's labour is the one intervention even non-interventionist governments can't resist.

But women are strong. We don't go away and we don't give up. All over the world we are dumping our children in childcare centres (or leaving them with aunties or nannies or the woman next door) and trundling off to work of another sort.

But wait, the free marketers haven't done with us yet. If the aim of education is to prepare people for the labour force, it's never too early to start. Why have kids messing around with playdough and pegs when they could be learning computer skills and Japanese? Why have an unexpected net loss when you could have a potential net gain?

The greatest threat to childcare now is probably not the troglodytes of Treasury - the "new right" who, according to Anglican theologian Don Cupitt, actually represent the last gasp of a dying conservative order trying desperately to hold onto its power in the face of much stronger forces such as feminism, environmentalism, peacism and the demands of indigenous people for their rights.

No, the greatest threat may well be the carnivores of commerce who are producing and pushing structured academic programmes and tests for under fives. If New Zealand follows what's happening in the US, we will soon have work sheets and achievement tests for two year olds. Four year olds will have to pass an exam to get into kindergarten and 5 year olds into school. There will be a whole new problem for Simon Upton's on-again off-again public health system to deal with: baby burnout.

As a parent I look askance at such developments. But others sadly may not. Experience in the United States has shown that it is parents just like me - university educated, two income families with less time but more money to spend on their children - who are the most enthusiastic about turning their children into miniaturised eggheads with executive stress.

In Australia recently I saw reports of a study on early childhood by specialists at the Louisiana State University under Dr Craig Hart. They had looked at kindergartens where children, instead of puttering about with finger painting, dress-ups and water play, were sitting at tables working their way through a structured curriculum. The results of this study would surprise no one. The children exhibited classic symptoms of stress. They bit their nails, twisted their hair, jigged nervously and cried their hearts out. No wonder.

The National Association for the Education of Young Children in the United States told the reporter that achievement tests were being used to stream pre-schoolers. Even more loony, children were having to sit a test before they were allowed to start school. There are now kindergarten drop-outs, children branded as failures before they even set foot inside the door of a primary school. You can imagine what that must do to a young child's confidence and self-esteem.

This is undoubtedly the next big debate which will hit early childhood education in New Zealand and of course it has already started. I think I recall hearing the Minister of Education talking at one stage about testing pre-schoolers. I thought at the time I must be dreaming. Now I'm not so sure.

If you believe that education has only one purpose - to prepare people for the work force - then pressure cooker pre-schools are a natural development. They are a natural corollary of new right economic thinking, which only goes to show, in my view, how bankrupt such thinking really is.

I hope all of us here will resist such developments and allow our under-fives to be - gloriously, freely, inventively and endearingly - children.

Thank you.

Paper presented to the Fifth Early Childhood Convention, Dunedin, New Zealand. September 1991.

# * A Preferred Child Care Education Service: The Quality of Te Kohanga Reo

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If a Martian family had visited earth a decade ago they would have been shocked and astounded to find that New Zealand, with its internationally high reputation in early childhood care and education, did not seem to be sensitive enough or doing enough to recognize the cultural needs of anyone else but Pakeha people (Fenwick, 1984). Under the Treaty of Waitangi (1840) Maori and Pakeha people are supposed to be partners in the control and equal sharing of resources. Until recently Maori parents did not have a genuine choice of early childhood service.

A revolution in the early childcare education field began in April 1982 when the first Maori, initiated and operated, centre opened. It was called a Kohanga Reo (language nest). Such was the success and need for this model of early education and care that a new movement was henceforth born. By the end of that year about 30 more had been established and this rose to 612 nationally in 1990. Recent statistics indicate a high Maori participation rate in Te Kohanga Reo (Ministry of Education, 1990). In 1989, 97.5 percent of children at Kohanga Reo were Maori. Approximately 45 percent (8,503) out of the 73 percent (10,589) of Maori children enrolled at some form of early childhood centre, attended Kohanga.

The intention of this paper is to explore what it is about Te Kohanga Reo programmes that make them a genuine choice of service for New Zealanders. Quality in early childcare education can be defined from a social-cultural perspective (Farquhar, 1990) and this paper sets out to identify and discuss the quality characteristics of Kohanga Reo through the eyes of parents and teachers.

## Description

Te Kohanga Reo are early childhood centres for the care and education of young children and a service to families. They may be in a variety of settings such as a school building, a community house, a privately owned home, a church hall, and on a Marae (Maori meeting place). Most provide full daycare although many are open part-day. They are licensed to operate by the Ministry of Education, and are required to have charters approved by the National Te Kohanga Reo Trust to receive government funding assistance.

The English equivalent of "Kohanga" is "Nest" and "Reo" is "Language". The concept of the "nest" provides a vivid visualisation of a place where growth is nurtured through love, care, and interest in development within the wider context of Maoridom as a whole.

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* This paper is included in this publication with the express permission and blessing of Mark Laws and the whanau of Te Kohanga Reo o Araiteuru. Mark Laws is Tumuaki o Te Kohanga Reo o Araiteuru, Kaitiaki o Te Mara Toroa Tino Rangatiratanga Unit, Kaitiaki Rangahau o Te Tari Maori o Te Whare Wananga o Otakou.

There is no doubt that Te Kohanga Reo has been a great success story for Maoridom. For example it was noted by Ranginui Walker that some 1,000 people attended Turangawaewae Marae for the Kohanga Reo conference in January 1984. At the Maori Educational Development Conference in March 1984 Maori were urged to withdraw from the existing educational system because it was failing Maori people and also to establish alternative schooling according to the Kohanga Reo model. Walker (1985) explains that centres benefit parents in providing them with opportunities to learn and practice Maori language. Te Kohanga Reo enables and empowers parents to articulate their needs and choose what is culturally best for them and their children.

## The Cultural Dimension and Kaupapa or Philosophy of Kohanga Reo

The cultural dimension constitutes the principles of immersion of children in the Maori language (te reo rangatira) and culture (nga tikanga) and whanau development. At the heart of the movement is the desire (and urgency) for self-determination (mana motuhake) to ensure language and cultural survival.

### TE REO (LANGUAGE)

Maori is traditionally an oral language. It was the European missionaries who developed a written language.

In the 1970s research indicated that spoken Maori was in danger of becoming extinct (Benton, 1979). Most native speakers were over 40 years of age and in many tribal areas there were few Maori speakers under 40 (Benton, 1979). Although about 20 - 25% of Maori were able to converse in Maori less than one percent of Maori five-year-olds were able to. The problem is exacerbated by the age structure of the Maori population. There are about four Maori children to every Maori over 45 years of age. Moreover, kaumatua (grandparents and great-grandparents) make up only about three percent of the population. Most kaumatua live in rural areas and country towns while the majority of Maori children live in the main urban areas.

The loss of spoken Maori seemed inevitable (Ka'ai, 1990). From the late 1800s until quite recently spoken Maori was banned in primary schools. Children were even administered corporal punishment for disobeying (particularly in the earlier colonial days). The attitude of Maori people towards their own language was negatively affected by educational policy and the negative attitudes of many teachers (Ka'ai, 1990). The mastery of English came to be viewed by most Maori parents and elders as a means to gain access to the new (pakeha) world of institutionalised education, health care, money, and standing in the community. They reinforced learning of the English language in their children; to the expense of promoting their own first language.

The Kohanga Reo movement has as its primary objective to ensure the survival of the Maori language and to promote its use through immersing children before they start school in a rich language environment. It is strongly believed that the most effective way of teaching language is to focus on children during their most receptive years and to provide support to families, agencies, and other institutions which have contact with the developing Maori learning child. To this end, it is advocated that children attend from birth. A saying which shows the emphasis on language teaching, through interaction, from a very young age, is:

> "Whanau ana te Tamaiti, Me rarau atu, Whakamau te u, Kei reira ka Timata te korero Maori"
>
> (When the child is born, take it, put it to the breast, speak Maori at that point)

## NGA TIKANGA (CULTURE)

Te Kohanga Reo were designed to foster the values of the whanau. The concept of "whanau" describes the traditional family arrangement of parents, grandparents, relatives, and others who are or accepted as members of the family, and each share responsibility for children's care and socialisation. Whanau values include aroha (love) and manaaki (caring, sharing and empathy). This is considered important if children are to develop a sense of identity and pride in being Maori.

An integral component of nga tikanga Maori is spirituality (taha wairua). Te Kohanga Reo aim to instil a sense and appreciation of the spiritual in children. Touching another's head, for example, is not permitted as the head is the most important part of the body and tapu (sacred). Karakia (prayer) is said naturally by both children and adults as part of the daily programme. The importance of children, people and life is taught. Care of the soil, animals, plants and all living things is communicated to children through interactions and the use of natural materials in play and cultural activities (Halkyard, 1983).

## WHANAU DEVELOPMENT

The principle of whanau development is central to the operation and success of the Kohanga Reo (Tawhiwhirangi, 1989). The Maori educational experts, the kaumatua (grandparents), koroua (male elders) and kuia (female elders) are considered to have a central role in providing guidance and tutelage. All members of the whanau are collectively responsible for Kohanga operation, from programming to administration, and involved in decision-making. This provides opportunity for a range of skills to be learnt, for example: catering, administration, gardening, maintenance and teaching. Parents are often involved in adult-learning programmes to ensure that they also learn Maori alongside their children.

The model of whanau development requires that all members of the Kohanga Reo whanau actively participate in learning together, collectively sharing the responsibilities for running their Kohanga and the work to be done. A report of a government review team in 1988 expresses two concerns about the ability of some Kohanga Reo to do this. First, in some Kohanga Reo only a small group of parents share the responsibilities; which does not facilitate whanau development. Second, women have been doing most of the work and have had the most involvement. Tawhiwhirangi (1989) suggests that while the women have been carrying the load, the men are being left behind in their learning, and the whanau (including children) have not benefited from their skills and interactions.

## MANA MOTUHAKE

> "Te Kohanga Reo is a contemporary example to New Zealand Society of how the principle of Tino Rangatiratanga (Self Determination) as expressed in the Treaty of Waitangi, can be implemented in practical terms" (Te Kohanga Reo Task Force, 1989, p. 4)

Because of a history of assimilation, marginalisation, and non-recognition of the principle of dual heritage of Maori and European under the 1840 Treaty of Waitangi, Mana Motuhake is a major objective and part of the kaupapa of the Te Kohanga Reo programme. Maori autonomy is sought through the movement by empowering Maori to control their children's socialisation and education and to influence education content and context in New Zealand society (Douglas and Douglas, 1983; Tawhiwhirangi, 1989). In this way Maori have taken greater control over their own language, lives and futures to decide what they want for themselves and demonstrate pride in being Maori.

## Early Education

According to Ka'ai (1990) pre-school preparation in the context of Te Kohanga Reo kaupapa may help children to escape the cycle of poor educational outcomes, low occupational prospects, and juvenile delinquency. Te Kohanga Reo is aimed at developing bilingual and bicultural children who can interact competently in both Maori and Pakeha worlds. Because Te Kohanga Reo attempts to positively influence children's "*collective cultural future*" (Smith and Swain, 1978, p. 129) a major goal is to prepare children academically and socially for school as well as for life.

For her Master's thesis research Ka'ai (1990) explored the hypothesis that a "*distinct Maori pedagogy where practical skills of the child are developed at the social and cognitive level*" exists which will facilitate entry of Maori children into school on an equal basis with Pakeha peers (p. 10). From her observations she argued that the more that school classrooms adopt an immersion programme like Te Kohanga Reo the less likely children will experience a mismatch in pedagogical processes.

So what is the educational experience of Te Kohanga Reo like for children? A description of a typical daily programme of a Kohanga Reo at Massey is given by Edmonson (1984, p. 4 - 6):

> "9.25 am: Shoes are removed at the door and mothers bring their children in, settle them and leave. The children are greeted and given instructions and settled by the Kaiako (teacher) in Maori. A prayer is said. An action song demonstrating parts of the body is sung as well as other children's songs. The children are then settled at the tables. Here they count and recognise colours with the use of blocks and dough. The Kaiako is constantly talking to the children.
>
> 10 am: All the equipment is cleared away and the children wash their hands in a basin. Grace is said and the children have hot milo and biscuits.
>
> 10.25 am: The children have free play now.
>
> 10.45 am: A picture story book was read to the children. Then newspaper hats were made for each child. The Kaiako, seated at the same level of the children, produced fruit and vegetables from a bag and these were named by individual children.
>
> 11.15 am: Pieces of apple were handed out and good manners stressed.

## The quest for quality: Fusion of goals, beliefs, and resources

Te Kohanga Reo does not focus solely on meeting children's developmental needs as do, for example, most kindergartens and playcentres. The special cultural dimension of Te Kohanga Reo means that the quality of the service should not be judged in comparison to or evaluated with other early childhood services.

In the quest for quality some debates and issues have arisen. These reflect different emphases and meanings attached to early education philosophy and appropriate practice.

One issue is the quantity and variety of typical preschool type activities in a Kohanga Reo setting. The range of equipment that is available, or used, may be minimal (Douglas and Douglas 1983; Bennett, 1985). This is because value is placed on people and interactions rather than on things and purpose made expensive equipment. For example it is reported that some:

> "Kaitiaki speak with scorn of Pakeha institutions for preschools with their structured programmes, masses of equipment ... that's not natural" (Dasler, 1982, p.39)

Alternatively, it has been argued from the parents point of view that preschool activity set-ups typical of the kindergarten, playcentre, and childcare programme, can be important if they are to feel that their children are getting a good early education:

> "Some parents get a bit edgy at the lack of pre-school 'equipment'. They feel their children may miss out, because of the bare surroundings, emphasis on natural materials and no toys, and that they many not be well prepared for school" (Tu Tangata, 1986, p. 11).

According to the international literature on child development, Douglas and Douglas (1983) argue that Te Kohanga Reo seems to provide a "restricted play environment" that does not promote all aspects of children's development They caution Kohanga Reo whanau to be careful not to do this.

A second issue is the style of teaching. According to an article in Tu Tangata (1986) there can be comparatively little emphasis placed on children's spontaneous learning in the context of interactions with peers and play situations in some Kohanga Reo. Children tend to be taught Maori in a repetitive and rote manner. It has been suggested that in the long-term such methods of teaching could result in children who are passive, non-experimental, and lack initiative (Douglas & Douglas, 1983). However, other researchers have pointed out that it is much too early to make conclusions such as these. Te Kohanga Reo are a relatively new child care education option and the movement is still developing. Research evidence does not show that any one curicula method is better (Smith and Swain, 1988). Furthermore, Bennett (1985) mentions that an emphasis on rote learning is consistent with the 'prodigious feats of memory' usual in pre-European settlement times.

A third issue is that of teacher qualification. Research has shown that trained teachers are critical for ensuring good-quality child care education. Paper qualifications, obtained through a training course can raise the professionalism of the work for staff which could ultimately benefit families and communities. Qualifications serve the purpose of indicating what knowledge and skills teachers have. This can be useful information in the process of selecting suitable teachers and planning the on-going development of teachers. In Te Kohanga Reo preference is often given to two personal qualifications over formal qualifications: age (over 35 years) and language fluency (native Maori speaker). The Government Review Team (1988) reports that the general belief is that teachers need only be fluent in te reo to provide the input basic to Te Kohanga Reo kaupapa. Tawhiwhirangi (1989) argues that it is important for fluent speakers to be working with children and families because otherwise the "more powerful English language will take over".

A fourth issue is the kind of setting that is best for a Kohanga Reo. This issue has arisen out of discussion on how best to speed up the growth of numbers of Te Kohanga Reo centres. Tawhiwhirangi (1989) has argued that home-based would save costs and speed up the process as compared to building or renting rooms for more centres. She has also suggested that Kohanga Reo should be Marae based because otherwise children may develop more aroha (love) for other (pakeha) institutions and not look after their Marae when they are older. A problem of Marae based and home-based Kohanga Reo however, is the ability to assure minimum health and safety standards, as defined by government early childhood centre licensing regulation. For example, on the Marae it would be inappropriate to give children individual bedding and cots when the usual practice is to gather together on mattresses on the floor to sleep.

## Carrying out this project: Research issues

This research has been done largely from a Pakeha, university based perspective. We feel it is important to explain this, the process, and the reasons why.

From the start of her research on the question of quality in early childhood education and care, Sarah a pakeha ex-kindergarten teacher post-graduate student, wanted to include at least two Kohanga Reo in her sample of different early childhood services. She was informed by a university Maori kaiarahi and some people at the local trust training branch of the National Te Kohanga Reo Trust that little research had been done on Te Kohanga Reo and that such research could be difficult to carry out. Had she opted to focus only on kindergarten, playcentre, and childcare centres this would have been devaluing Te Kohanga Reo as a legitimate part of the early education sector. She considered it important that Kohanga Reo be part of the study and that the quality of Kohanga Reo be examined specifically from a cultural perspective.

Karina, a Maori women, with involvement in Te Kohanga Reo as a parent and through her husband's involvement in the local trust training branch, was interested in the project. Karina worked with Sarah to assist in making contacts with Te Kohanga Reo whanau and to collect data.

Obtaining permission to study and for the collection of information from parents and teachers proved to be considerably more time consuming and a much longer process than at the other types of services. One reason may have been that this was an academic study, which included rather than focused on Te Kohanga Reo. Suspicion of written communications and the questionnaire approach was felt. Karina tried to communicate through her personal involvements in both Kohanga Reo that we were genuinely interested in Kohanga Reo as a distinctive and Maori early childhood service. Another reason is that the Kohanga Reo came into the project after the methodology had been developed and was being implemented in the other types of centres. There had been comparatively less consultation with Kohanga Reo leaders on initial decisions about the research aims and design. An alternative to this top-down methodological approach, would have been a bottom-up methodology to secure greater commitment and interest in the research.

We acknowledge these problems in writing and presenting this paper. We hope that this acknowledgement will provide some insights and useful guidance for others who wish to study Te Kohanga Reo.

# METHOD

## Sample

Permission to carry out this research was first sought through the local branch of the National Te Kohanga Reo Trust. The district representative informed the other South Island branches.

Copies of a panui (pamphlet) outlining the nature of the project and a written mihi by the researchers was sent to the secretary of the whanau at four Kohanga Reo. This was followed by telephone calls to the secretary and kaiako. It took some months to negotiate permission for study at two Kohanga whose secretaries had indicated during preliminary conversations with Karina that they would probably be able to and likely to participate. The two Kohanga Reo will hereafter be referred to as "K-Ra" and "K-Rb" to help to prevent their identification.

At K-Ra the panui and discussion about the study was carried over to a second whanau meeting a month later. This next meeting was postponed because many of the whanau members were out of town attending a tangi (funeral). About seven weeks after the panui was initially sent, participation in the study was agreed upon by the whanau committee. A letter of confirmation was to be sent to us. Karina contacted the secretary a couple of weeks later when the letter did not arrive and it appeared that they were instead waiting for us to say when we would be starting.

When we first contacted the secretary at K-Rb she explained that it was in semi-recess and running only one day a week by the parents until their new teacher started in a few weeks time. We were advised to wait until the new teacher had settled in before making further approaches. Copies of the panui and an enclosing letter about the project were later sent to the secretary, and a follow-up telephone call confirmed the willingness of the whanau and teacher to participate.

### DESCRIPTION OF THE KOHANGA REO

K-Ra is located in a central city area, in a converted family home building. The children are divided into two classes, one comprising of infants and toddlers and the other of over two-year-olds). A teacher is responsible for each group. One teacher is a fluent speaker of Maori and the other speaks Maori but does not regard herself as fluent. A few parents assist on a part-time basis in areas such as cooking and cleaning. There is a hard core of parents (about five to six) who attend whanau meetings and respond to needs for assistance. The roll varies from between 18 to 25 children a week; some are part-time attenders and others full-time five days a week.

K-Rb is located in a semi-rural area at a Marae. There appears to be a high rate of unemployment in this area. Many parents are able to give time to be and help at K-Rb. The teachers and her one assistant (kaiawhina) are not fluent speakers of Maori and both English and Maori is spoken with an emphasis on Maori. There does not appear to be kaumatua participation in the programme but the elders of the Marae maintain a general interest in it. The kaiawhina runs a mini-bus service so parents need not make the trip. Approximately 17 children were enrolled. Usually only about three-quarters of the number of enrolled children are in attendance at any one time. K-Rb is open three and a half days a week.

## TEACHERS

Two (of the three) teachers participated in this study. A teacher at K-Ra had reserved thoughts about this study and sharing what she was doing in Te Kohanga Reo. The two teachers, one from each Kohanga Reo, who participated in the study, worked an average of 27 hours a week (Std Dev. 4.24). They were both Maori, aged over 35 years, mothers, with no formal training in early education and care, and no high school qualifications.

## FAMILY AND PARENT CHARACTERISTICS

A total of twelve families participated, eight from K-Ra and four from K-Rb. Their children had been attending for a mean of 21.33 months (Std Dev. 17.57). The majority of children were described as Maori (83%), one as a Pacific Islander and one as Pakeha.

Half of the families were nuclear two parents families. One family was an extended family, with grandparents in the same household and regarded as playing a central role in child raising. Five families were single-parent families. In all families though, it was the mothers who seemed to hold the major responsibility for child care, as they stated this in response to a question on the questionnaire and they were the ones who completed the questionnaire. Most mothers (N = 10) were engaged in outside-of-the-home employment or tertiary study for part or all of the time that their children were at Kohanga. Some mothers (N = 5) used the time that their children were at Kohanga to participate in leisure activities outside of their home or to take a break at home. Half of the mothers (N = 6) also chose to stay at their Kohanga Reo at times.

At least five of the families lived on considerably less than the average income in New Zealand, with a gross income of between $10,000 - $20,000 in the last year. Three families had an income of between $20,000 and $30,000 in contrast to one family that reported an income of $50,000 plus. Three mothers declined to state their family income.

Four out of twelve mothers did not hold any high school qualification. Most mothers (N = 9) did not have a post-school qualification. Two mothers held tertiary-level diplomas or degrees and one held a trade certificate.

The majority of families (N = 10, 83%) relied only on their Kohanga Reo for providing early education and care. One child attended a Tongan Language Nest, and a mother took her two children to a playcentre one morning a week because she was a supervisor there.

## Procedure

### RESEARCH QUESTIONS

This paper addresses the following research questions:

1. What are parents impressions of their Kohanga Reo?

(a) What do they like most about their Kohanga Reo?

(b) What changes or improvements would they like?

2. What goals and principles of early education and care do parents and teachers expect their Kohanga Reo to meet?

3. What do parents and teachers generally focus on in appraising the quality of Kohanga Reo?

4. How important are various research derived indicators of good-quality for parents and teachers in the context of Te Kohanga Reo kaupapa?

5. How well do the Kohanga Reo met each of these indicators of good-quality as judged by parents and teachers?

### QUESTIONNAIRE

Two questionnaires, one for teachers and one for parents, were prepared as part of the larger study of "*Quality in Early Childhood Centres*". The questionnaires were modified for Te Kohanga Reo in two ways. Some of the language was changed to improve the clarity and meaningfulness of the questions and some of the words and phrases were changed to te reo Maori.

The questionnaires were long (ten typewritten pages) and usually took between 45 minutes to one hour to complete, depending upon the length and frequency of discussions with the researcher(s) about the intention of the questions or about an answer to a question. The first two pages of both questionnaires contained both open-ended questions and questions which asked people to indicate their preferences from a variety of listed choices. The bulk of the questionnaire asked people to rate items related to goals and indicators of good-quality by simply placing a circle around an appropriate number or score. The last page asked parents and teachers for some brief details about themselves (for example, their education and how long they have been at Te Kohanga Reo).

### DATA COLLECTION AND ANALYSIS

Approaches to data collection varied slightly between the Kohanga Reo. This was mainly because of differences in how the two Kohanga Reo whanau regarded their involvement, their relationship with us, and because we wanted to cause as little actual disruption as possible in gathering data that would be fruitful from a research point of view.

At K-Ra a whanau meeting was arranged at which it was agreed that one of us, Sarah, would discuss the study further, distribute the questionnaires, and be on hand to answer queries which people might have as they individually work through the questionnaire. Four parents came to this meeting; a disappointing turnout for us and the secretary of the whanau committee. Informal feedback suggested that it may have been better if Karina or a Maori person had gone instead of Sarah as the parents had interpreted her presence as being for the purpose of "*keeping an eye on us*". Karina attempted to set up a time for another whanau meeting with the secretary but it was difficult to find a time that was convenient to most members of the whanau. After a few weeks of discussions to sort out a time, Karina came up with the idea that perhaps it would be better if she spent some whole days at K-Ra to catch parents as they came and went, and to free any parents who were helping in the Kohanga to complete a questionnaire. Karina spent about a week doing this. At the end of the week she felt as if her requests for completed questionnaires had started to take the form of nagging. A similar reaction was encountered in K-Rb. (This was a good learning experience for us, as explained on page earlier).

At K-Rb, a parent volunteered at a whanau meeting when participation in the study was first discussed, to take responsibility for distributing the questionnaires. Karina had said that she would like to do this herself in the same way that she had done in K-Ra but the whanau committee agreed with the parent that it would be unnecessary for her to make daily trips out. Two weeks later Karina phoned and was told that the questionnaires had not yet been distributed. Karina phoned again, after discussion with Sarah, and negotiated to spend a couple of days at K-Rb to personally approach parents and collect completed questionnaires.

At K-Ra Karina gave koha of large children's story books and her time in assisting with the children. At K-Rb Karina gave practical assistance in helping with the children and became involved in providing advice and guidance to the whanau who were attempting to write a charter as required by the Ministry of Education.

The personal approach to handing out and following-up questionnaires helped to get a slightly higher response rate than might have otherwise been possible. We also became aware of comprehension problems in some of the terminology used in the questionnaire. For example, one parent turned to the teacher and asked whether they had a "programme" and what a programme was. The personal approach meant that Karina was usually on hand or readily available to provide explanations and any clarifications.

Parent and teacher answers to the open-ended questions were analysed by listing their various responses, looking to see how many others made the same responses, and categorising responses that were the same. Answers on rating questions were analyzed using a statistical computer package SSPSx to calculate the means and standard deviations.

# FINDINGS

## Parents impressions about their Kohanga Reo

### (A) ASPECTS THEY REALLY LIKE

Parents described a number of aspects about their Kohanga Reo which they found appealing. Their descriptions are summarized in Table 2.

The location of K-Rb appealed to all K-Rb parents, and some also listed that they liked it because it operated in the Marae and they felt close to their grandparents who were buried there. Two parents from K-Ra stated that the opening hours and the flexibility of how they could use the hours suited them.

More parents at K-Rb compared with K-Ra made positive statements relating to the nature of early care and education provided. Most parents at both Te Kohanga Reo praised the emphasis on teaching and learning of the Maori language and culture. Only one parent (at K-Ra) praised the quality of early education care. Most parents, however, stated that they really liked the social environment and atmosphere of warmth and friendship of their Kohanga.

**TABLE 1.**

**Parents' Statements On What They Like About Their Kohanga Reo**

| K-Ra | K-Rb | |
|---|---|---|
| **DEMOGRAPHIC** | | |
| | 4 | Location |
| | 2 | Marae based |
| | 1 | Kaumatua buried in grounds |
| **ADMINISTRATION** | | |
| 1 | | Hours are suitable |
| 1 | | Informal "*you don't have to get your child here by a certain time everyday*" |
| **PROGRAMME** | | |
| 1 | | Quality of early education and care |
| | 1 | Natural resources used in activities |
| 3 | 1 | Children learn culture, reo, and waiata |
| | 3 | Maori language is always used |
| **SOCIAL ENVIRONMENT** | | |
| 2 | | Relaxed atmosphere |
| 3 | 2 | Feels like home ("*sense of belonging*", "*caring atmosphere*") |
| 2 | 2 | Children make friends |
| 1 | | Opportunities for parents to meet others |
| 4 | | Kohanga Reo provides an extended family |
| 3 | | Warm friendly teachers |
| 1 | | Dedicated teachers ("*not just interested in wages*") |

### (B) THE CHANGES AND IMPROVEMENTS PARENTS WOULD LIKE

Ten parents mentioned at least one need for change or an improvement that they would like to see in the service or programme of their Kohanga Reo. These are summarized in Table 2 below. Parents concerns came under the areas of: administration, teachers, physical environment, programme, and whanau involvement.

Funding and financial management was mentioned as a concern at K-Ra. One parent said that the instability of the Kohanga Reo affected her and other families. Examples of this instability was the recent challenge of operating without a teacher and relying on parent help, and now being faced with the need to develop a charter to secure government funding:

> "We face major problems which are almost insurmountable, however we stumble along until the next one".

A parent at K-Ra mentioned the need for a policy to be developed and made known to all parents on how they should react to a child other than their own who misbehaves:

> "The most difficult situation occurs when a disruptive child's parent is present but does not point out the unacceptable behaviour of their child".

Four different parents expressed concerns relating to the need for staff training in child education or changes to the way in which teachers interact with the children. For example one parent suggested that teachers should be trained so that they:

> "... know how long children can sit still and learn in a formal way".

The concern for teacher training seems to be tied in with the range of concerns that were expressed at K-Ra about the children's programme and teaching approaches and at K-Rb about the whanau learning programme.

Finance and staff training could be factors possibly affecting aspects of the physical environment which a few parents suggested improvements on.

At K-Ra the programme appeared to be of greater concern to the parents than at K-Rb, on the basis of the number of parents who gave suggestions or made comments on the need for improvements in organization and content. The lack of activities or range of activities was a concern amongst some parents as was the appropriateness of activities, for example:

> "Especially the older ones get bored without specific activities".

The emphasis on parent involvement in the daily programme may mean that sometimes the children miss out on attention or adequate supervision. A pertinent point made by one parent was:

> "When there are more than three or four adults they all talk together and the children run wild".

At both K-Ra and K-Rb some parents suggested that more parents and whanau members (other than the "hard core" who were usually always giving their time or participating) could become more involved in helping out in the daily programme and running of their Kohanga Reo.

TABLE 2.

## Parents' Suggestions for Improvements Needed in their Kohanga Reo

| K-Ra | K-Rb | |
|---|---|---|
| **ADMINISTRATION** | | |
| 1 | | Need expert advice on financial matters |
| 1 | | More funding |
| | 1 | Instability of the Kohanga Reo |
| 1 | | Policy needed on how parents should manage the behaviour of other children |
| **TEACHERS** | | |
| 2 | 1 | Need teachers trained in early education |
| | 1 | Teachers needs to be more motherly and even-handed |
| **PHYSICAL ENVIRONMENT** | | |
| 2 | | More rooms, facilities, to cater for children |
| 1 | 1 | Need more toys and equipment |
| **PROGRAMME** | | |
| 1 | | More organized programme |
| 1 | | More flexible programme |
| 1 | | More variety in daily activities |
| 2 | | More learning programmes for over four-year-old children and less play |
| 1 | | Encourage pro-social behaviour (e.g. manners, sharing) |
| 1 | | Children should always be supervised |
| | 1 | Relaxed Maori conversation among whanau instead of lessons |
| | 2 | Total whanau involvement in learning te reo alongside the children |
| **WHANAU INVOLVEMENT** | | |
| | 1 | Need Kaumatua support |
| | 1 | More whanau support to reduce committee workload |
| 1 | | More parent participation to help in the programme |
| 1 | | Whanau needs to be more supportive of parents who "have problems", "are working and can't fully participate" |

## Goals and principles of Te Kohanga Reo

Parents and teachers were asked to rate the importance of different goals and principles of Te Kohanga Reo programmes. Table 3. shows a range of goals that were rated as very important and three goals only that were as slightly less important.

The two most important goals, on which parents and teachers all agreed on, were:

(i) the promotion of te reo rangatira and nga tikanga,

(ii) providing a programme that recognizes children's developmental differences including their interests and individual learning styles.

The next two most highly rated goals were to do with meeting children's social-emotional needs.

It is interesting that two seemingly incompatible goals were rated highly, namely: promoting normative behaviour (i.e. fostering compliance with adult/group expectations) and encouraging independence and self-reliance in children. The social compliance goal was rated slightly higher though, than the individualism goal. The fostering of intellectual abilities and the teaching of pre-school preparation skills (such as writing one's name) were rated as comparatively less important to goals of promoting social, cultural, and language development. The inclusion or teaching of cultures and languages other than Maori was rated on average as the least important goal. The standard deviation for this item, however, indicates a wide range in opinion about its importance.

**TABLE 3.**

**The Means and Standard Deviations of Parent/Teacher Combined Ratings of the Importance of Various Goals for Te Kohanga Reo Programmes**

*(4 = very important, 3 = important, 2 = moderately important, 1 = not important)*

| | |
|---|---|
| Promote Maori cultural/language development | X = 4.00 (Std.Dev. 0) |
| Provide a programme that recognizes children's developmental differences | X = 4.00 (Std.Dev. 0) |
| Provide warm loving care | X = 3.93 (Std.Dev. 0.27) |
| Provide a safe and secure environment | X = 3.93 (Std.Dev. 0.27) |
| Promote development of self-confidence | X = 3.64 (Std.Dev. 0.49) |
| Encourage peer relationships | X = 3.64 (Std.Dev. 0.63) |
| Promote normative behaviour | X = 3.64 (Std.Dev. 0.63) |
| Meet children's individual needs | X = 3.64 (Std.Dev. 0.50) |
| Promote aesthetic development | X = 3.64 (Std.Dev. 0.50) |
| Promote language development | X = 3.57 (Std.Dev. 0.51) |
| Encourage independence and self-reliance | X = 3.43 (Std.Dev. 0.76) |
| Help children to relate to adults | X = 3.43 (Std.Dev. 0.76) |
| Work in partnership with parents | X = 3.36 (Std.Dev. 1.01) |
| Promote physical skill development | X = 3.29 (Std.Dev. 0.73) |
| Entertain children | X = 3.29 (Std.Dev. 0.73) |
| Promote conceptual/intellectual development | X = 3.29 (Std.Dev. 0.73) |
| Provide parents with support and friendship | X = 3.21 (Std.Dev. 0.89) |
| Promote moral development | X = 3.14 (Std.Dev. 1.03) |
| Parent education about child-rearing | X = 3.00 (Std.Dev. 0.96) |
| Teach pre-school skills | X = 2.86 (Std.Dev. 0.95) |
| Promote learning of other culture(s) and languages | X = 2.79 (Std.Dev. 1.05) |

## Parent and teacher beliefs on what indicates quality in Te Kohanga Reo

Two types of questions on good-quality child care education in the context of Te Kohanga Reo were asked. This section presents responses to the first question which asked parents and teachers to define and describe in their own words what they considered were the key characteristics of a good-quality early childhood centre.

The parents descriptions of good-quality Kohanga Reo are summarized in Table 4. Parents emphasised factors for ensuring:

(i) children's happiness,

(ii) a good-quality programme (Maori language teaching)

(ii) whanau/community involvement (specifically in terms of securing the co-operation and commitment of members of the whanau).

The teachers at each Kohanga Reo both referred to parents and family as being central to a good-quality centre. One teacher also stated "he whare pai" (a good building), "tamariki" (children), and "wahi takaro pai mo nga" (good play for all).

**TABLE 4.**

**Parents Opinions On Factors That Indicate Good-Quality Te Kohanga Reo**

| NUMBER OF PARENTS | |
|---|---|
| **CHILDREN'S HAPPINESS** | |
| 6 | The children are happy |
| 4 | An atmosphere of aroha (love) |
| 2 | A schedule of daily routines is followed |
| 2 | No physical punishment or threat of using it |
| 1 | Tasty kai (food) |
| **TEACHERS** | |
| 4 | Personal qualities of the teachers |
| 1 | Teacher has status as an elder |
| 1 | Trained teacher |
| **PROGRAMME** | |
| 9 | Maori language is taught and emphasised |
| 3 | Teaching of traditional skills, knowledge (e.g. waiata, poi) |
| 2 | Supports children individual learning needs |
| 1 | Involved adults ("do not just sit around talking together) |
| 1 | Children can choose their own activities |
| 1 | Prepares 4 year olds for school (e.g. "taught to be independent, to tie own shoe laces") |

| | |
|---|---|
| **PHYSICAL ENVIRONMENT** | |
| 1 | Layout of space |
| 1 | Quality of equipment |
| 1 | Mixture of quiet and noisy areas |
| **WHANAU/COMMUNITY INVOLVEMENT** | |
| 6 | Whanau works together (has the same aims) |
| 2 | Whanau provides parent support (understanding, sympathy) |
| 1 | Supported by kaumatua |
| 1 | Interest shown by community volunteers |

## Parent and teacher ratings of the importance of various components of good-quality child care education suggested in the research literature

The section presents responses to the second question asked. This question gave parents and teachers a set of pre-determined items derived from the research literature and asked them to indicate the importance of each for ensuring good quality child care education in Te Kohanga Reo using a rating scale of 4 (very important) to 1 (not important).

Table 5. shows a summary of the items and the means and standard deviations of teacher and parent combined ratings of the importance of these. Two criteria were rated as very important by everyone:

(i) teachers show children they care about them, and,

(ii) teachers are responsive to children.

A number of other criteria relating mostly to children's social-emotional needs, physical needs including health and hygiene, and play needs were rated high in importance. The items rated as being of least importance were: qualified teachers, teacher professionalism, a planned written programme, and home visiting.

It should be noted that parents and teachers rated centre characteristics (namely: qualified staff, group size, staff:child ratio, staff stability) which research has shown to be strongly related to the quality of programmes for children as less important on average than other (presumably more cultural and social based) characteristics. The majority of empirical items of good quality were still rated however as important by the parents and teachers.

**TABLE 5.**

## Parents' and Teachers' Beliefs on the Importance of Various Items of Good-Quality Early Education and Care and their Ratings of their Kohanga Reo on these

| | * IMPORTANCE | ** RATING |
|---|---|---|
| **MOST IMPORTANT** | **MEAN (S.D.)** | **MEAN (S.D.)** |
| Teachers show children they care about them | 4.00 ( .00) | 2.93 ( .27) |
| Teachers are responsive to children | 4.00 ( .00) | 2.77 ( .44) |
| Sensitive settling-in process | 3.93 ( .28) | 2.70 ( .48) |
| Children's physical needs met | 3.93 ( .27) | 2.85 ( .38) |
| Stimulating/interesting play activities | 3.93 ( .27) | 2.31 ( .48) |
| Developmentally appropriate activities | 3.93 ( .27) | 2.50 ( .67) |
| Teachers are warm and caring people | 3.93 ( .27) | 2.85 ( .38) |
| Clean building, facilities, equipment, toys | 3.93 ( .27) | 3.00 ( .00) |
| Personal hygiene rules taught | 3.93 ( .27) | 3.00 ( .00) |
| Children's health needs taken into account | 3.93 ( .27) | 2.93 ( .28) |
| Parents contribute to decision-making | 3.93 ( .28) | 3.00 ( .00) |
| Non-sexist behaviour and language | 3.92 ( .28) | 2.58 ( .67) |
| Individual, small and large group activities | 3.86 ( .36) | 2.77 ( .44) |
| Family values and customs supported | 3.86 ( .36) | 2.69 ( .48) |
| Teachers work together as a team | 3.86 ( .36) | 2.62 ( .65) |
| Parent contact with centre encouraged | 3.83.( .39) | 2.64 ( .51) |
| Biculturalism promoted | 3.79 ( .58) | 2.75 ( .45) |
| Teachers play with the children | 3.79.( .43) | 2.92 ( .28) |
| High ratio of teachers to tamariki | 3.77 ( .44) | 2.20 ( .79) |
| Teachers model good health and hygiene | 3.77 ( .60) | 3.00 ( .00) |
| Children supervised at all times | 3.71 ( .47) | 2.58 ( .67) |
| Teachers experienced with young children | 3.71 ( .47) | 2.69 ( .63) |
| Awareness of different cultures promoted | 3.71 ( .61) | 2.54 ( .66) |
| Toys and equipment safe and maintained | 3.69 ( .63) | 2.42 ( .52) |
| Environment allows special needs children to fully participate | 3.67 ( .49) | 2.08 ( .79) |
| Outside professional assistance used | 3.67 ( .49) | 2.46 ( .69) |
| Balance indoor and outdoor activities | 3.64 ( .63) | 2.31 ( .75) |
| Regular outings and excursions | 3.64 ( .63) | 2.92 ( .28) |
| Provision for sick children | 3.64 ( .93) | 2.25 ( .99) |
| Parents and families made welcome | 3.64 ( .63) | 2.75 ( .45) |
| Balance child and staff initiated activities | 3.62 ( .65) | 2.42 ( .79) |
| Parents regarded as joint partners | 3.62 ( .51) | 2.42 ( .90) |
| Parents informed of philosophy and practices | 3.58 ( .67) | 1.92 ( .79) |
| Notification of infections/diseases | 3.57 ( .85) | 2.77 ( .60) |
| **IMPORTANT** | | |
| Community members participate in programme | 3.46 ( .66) | 2.80 ( .63) |
| Home like pleasant atmosphere | 3.43 ( .76) | 2.54 ( .52) |
| Sufficient toys, equipment and resources | 3.43 ( .94) | 2.23 ( .84) |
| Peer group stability | 3.29 ( .83) | 2.85 ( .38) |
| Aims based on child and family needs | 3.46 ( .69) | 1.64 ( .67) |
| Teachers do formative programme evaluations | 3.39 ( .77) | 1.50 ( .67) |
| Teachers undertake refresher training | 3.39 ( .96) | 1.80 ( .79) |
| Physical environment supports teachers needs | 3.36 (1.01) | 1.58 ( .67) |
| Friendship and support for parents | 3.36 ( .84) | 2.62 ( .65) |
| Stability in staffing | 3.33 ( .65) | 2.46 ( .82) |
| Group size not too big | 3.31 ( .95) | 2.55 ( .69) |
| Clear pathways between activity areas | 3.29 ( .83) | 2.51 ( .66) |
| Excessive punishment not used | 3.23 (1.30) | 2.39 ( .96) |
| Reports on child activities and progress | 3.22 ( .98) | 1.85 ( .90) |

| | | |
|---|---|---|
| Supervisor/Teachers provides good leadership | 3.17 ( .94) | 2.09 ( .83) |
| Parent education on child-rearing provided | 3.15 ( .90) | 1.83 ( .84) |
| Teachers have parenthood experience | 3.14 (1.17) | 3.00 ( .00) |
| Physical environment supports parent needs | 3.00 (1.00) | 2.25 ( .75) |
| **MODERATELY IMPORTANT** | | |
| Qualified teachers | 2.86 (1.23) | 1.58 ( .79) |
| Written schedule of routines and activities | 2.75 (1.06) | 1.58 ( .52) |
| Professionalism considered important | 2.64 (1.28) | 2.09 ( .94) |
| Teachers visit children and families at home | 1.92 (1.08) | 1.58 ( .79) |

** 4 = very important, 3 = important, 2 = moderately important, 1 = not important.*

*** 3 = met, 2 = partially met, 1 = not met.*

## Parent and teacher ratings of the quality of their Kohanga Reo

Parent and teacher combined ratings of how well they felt their own Kohanga Reo met each of the criteria of good-quality are shown alongside the importance ratings in Table 5. There appears to be minimal disagreement among parents and teachers in their ratings of quality on each criteria (Standard Deviations ranging from 0 to .99, with most being below .5).

Only five criteria were rated as being fully met in both Kohanga Reo (fully met, Mean = 3):

(i) teachers model good health and hygiene,

(ii) children are taught good personal hygiene rules,

(iii) teachers are experienced through being parents themselves,

(iv) parents contribute to decision-making,

(v) the building, facilities, equipment, and toys are kept clean.

Out of the criteria rated as very important or close to (Mean scores 4 to 3.92), it seems that parents and teachers felt that:

(i) the teachers could be more responsive to the children,

(ii) the process for settling new children into the programme could be more sensitive,

(iii) the play activities could be more interesting and developmentally appropriate,

(iv) there could be greater emphasis on non-sexist language and behaviour.

The criteria that were rated as being important and moderately important but which were perceived to be around the partially met mark in reality (i.e. 2.5 to 1.5) were: -

- the ratio of staff to children,
- the safety and maintenance of toys and equipment,
- provision for special needs children,
- use of professional assistance/services,
- provisions for sick children,
- balance of indoor and outdoor activities,
- balance of staff initiated and child initiated activities,
- parent-teacher partnership,
- parents informed of philosophy and practices,
- adequacy of play resources,
- programme aims developed from an understanding of child and family needs,
- formative evaluations of the programme carried out,
- low turn-over of staff,
- excessive punishment is not used,
- regular reports to parents,
- good leadership provided by the teacher in-charge,
- parent education on child-rearing,
- physical environment supports parent needs,
- qualified staff,
- written schedule of routines and activities,
- teacher professionalism.

## Discussion

Of the 612 Kohanga Reo in New Zealand the results of studying two South Island ones are presented. Te Kohanga Reo has a distinctive quality - being predicated on a cultural basis different to traditional pakeha playcentre, kindergarten, and childcare services. This is particularly illustrated by parents and teachers ratings of the relative importance of the various components of good-quality child care education supported in the literature. Many of the empirical indicators of good-quality child care education are important in Kohanga Reo but excellence tends to be defined more strongly in terms of aspects related to Maori aspirations, culture, and language.

People are considered to be the greatest resource and influence on the quality of Te Kohanga Reo. The major cultural dimensions of quality in Kohanga seem to be an emphasis on:

(i) learning and teaching Maori language,

(ii) human relationships and socio-emotional well-being rather than on equipment and facilities,

(iii) the teachers' personal qualities rather than on professionalism and their educational record,

(iv) parents as learners and parent involvement at both programme and administration levels,

(v) the development of a whanau system within the Te Kohanga Reo setting, including children, families, teachers, and kaumatua.

It appears that parents (in particular) and teachers do not want Kohanga Reo to assume the role of preparing children specifically for entry to school (for example: teaching pre-academic skills). Ensuring that children are immersed in te reo Maori and nga tikanga appears to be much more important for children and families and for the purposes of Kohanga Reo. Nurturing children's cultural knowledge, identity and pride in being Maori seems to be a much more valued path to ensuring children's success at school and as members of society.

Clearly value is placed on working as whanau; on parent involvement as learners, administrators and helpers to the teachers. However, the data suggests that greater parent commitment and involvement is needed and wanted. The Government Review Team (1988) noted that whanau development can not be facilitated unless a large number of parents and others associated with a Kohanga Reo actively share the responsibility.

One way of achieving greater whanau involvement could be through techniques to increase parents enjoyment and motivation for learning alongside their children. For example, a parent suggested that instead of "lessons" she would prefer more relaxed conversation. A reality of today's society is that some parents simply haven't the time to give, and this is an issue which may increasingly threaten the principles of whanau development and whanau based operation.

It is important that teachers are fluent in te reo Maori and nga tikanga Maori. The degree to which the kaupapa of Te Kohanga Reo can be realised depends on this.

Comparatively little importance was placed on staff training and formal qualifications but the research literature suggests that the personal (and cultural) qualities of teachers alone can not guarantee a good-quality programme. Teacher training, and other teacher variables such as team-work and professional behaviour, can help to ensure the standard of programme quality. Parents made fewest positive comments on and made most suggestions for improvements in programme areas related to children's experiences. Parent and teacher ratings of the quality of their Kohanga Reo may have been higher had the teachers had specialized training.

The response of the two Kohanga Reo whanau was classic whakama (resistance and shyness) to research. It was difficult for us to communicate that we did not have a hidden agenda of making claims, making judgments, or inappropriate comparisons to other early childhood services, that would go against what the Kohanga Reo movement has been working to achieve. Only time, trust and the development of methodologies and ability to engage in research that is truly Maori research will help to overcome this.

Problems of using traditional academic research approaches were encountered. The questionnaire method, although personalized somewhat by the presence and availability of a researcher to discuss questions and to assist (if asked), was found to not be a very rewarding process or an attractive technique for parents and teachers. The methodology of this study could be refined and the research questions investigated in a larger more diverse sample of Kohanga Reo. Future studies could document and evaluate progress towards higher quality from both cultural and educational perspectives, and examine relationships between government licensing regulations and Te Kohanga Reo kaupapa and practices.

## Conclusion

The data presented here has statistically and qualitatively shown that there is a high degree of congruency between people's aspirations and the pedagogy of Te Kohanga Reo. Te Kohanga Reo are the preferred early childhood service option even though parents may not be totally satisfied with some aspects and some problems are noted.

Te Kohanga Reo does provide parents with a genuine choice of early childhood service. Parents and teachers have clear views on what constitutes good-quality and the personal/cultural qualities of the teachers and the programmes seem to be, as important, and more important than many of the traditional indicators of good-quality early childhood services.

Greater whanau involvement and positive attainment of the other attributes that define excellence within the system of care, education and Maori pedagogy preferred by parents and teachers is possible. Parents comments and ratings suggest that teacher behaviour, knowledge, and professionalism have a major influence on quality. The provision of culturally relevant in-service training opportunities about child development, child care, administration, and work with parents, for those who are unlikely (because of age or cost reasons) to do a pre-service qualification course are essential.

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## EARLY INTERVENTION AND TE KOHANGA REO: WORKING IN PARTNERSHIP

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E Nga whaea
Nga mihi maha kia koutou aku hoa
E koa ana taku nga kau kei konei maua
Ko Hori, Ko Lindy, i tenei hui.

Greetings to you my colleagues
My heart is indeed happy to be here with
George and Lindy at this Convention.

I come from Northland, Te Hiku o te ika a Maui, the tail of the fish of Maui.

As the tail of the fish moves so does the rest of the fish follow, and it is no accident that we are here today speaking about our partnership with Kohanga Reo, because it was Sir James Henare, the Ngapuhi from Kawiti in the North, who, with Mrs Tilly Reedy from Ngati Porou first had the idea of Te Kohanga Reo – or language nest – the place where the young children would learn the Maori language, and stand tall with pride in themselves and their people.

The Kohanga Reo movement is one of the greatest influences on Maori infants and young children growing up in Aotearoa in the 1990's. At present, there are roughly 2,000 children attending 87 Kohanga Reo Centres in the Tai Tokerau District. It can, therefore be expected that about 200 of those children will have special needs at some time during their early childhood years. Understanding and enhancing the needs of these children and their families can have beneficial effects on a sizeable proportion of Maori Society and, consequently, on New Zealand as a whole.

I work for the Special Education Service as the District Adviser in Early Intervention catering for the needs of families and teachers where their is a young child with special needs.

The partnership between the Early Intervention Service and Nga Kohanga Reo in Northland has proceeded along various channels.

1. Our Amokura, Don Ngawati, organised for representatives from our Special Education Service District Management Team and local Field Staff to be invited to attend the Runanga Meetings of all the District Tribal Committees - 13 in all. These meetings, which where usually held on the local marae, gave us an opportunity to hear local concerns. Issues raised were their children's language, problems imposed by isolation, resentment at not being able to have a say and a distrust of Pakehas going in and telling them of what's good for them.

   We let the people know
   who we were
   what we did
   how we could assist them help their children with special needs
   Our message to them,
   "We have transport and will travel – to work with individuals or groups, in homes, in Kohanga Reo or other early childhood settings."

   We had great difficulty in explaining that we were NOT the Ministry of Education.

2. We have worked with the Iwi Transition Agency to ensure Kohanga Reo representation on all our Early Intervention Management Teams.

3. We were delighted to have 3 Kaiako selected for the Towards Inclusion Programme. This was a national inservice training for regular teachers to help in the inclusion of children with special needs in mainstream education, and gave teachers skills in problem solving, writing Individual Developmental Plans, and practical help and support through networking with S.E.S. staff and other teachers.

4. Glen Stephens, our Adviser on Deaf Children, is doing some splendid work with the local health processionals on the Glue Ear Programme. This problem is rife in Northland, and the combination of education and treatment targeting the under 3's through the Kohanga Reo is already having spectacular results.

5. Some of our Early Intervention Staff and I worked with George Cherrington in providing a series of workshops for the Kaiako and Kaiawhina in the Whangarei area on topics related to the identification and teaching of children with special needs. This scheme is about to be extended into the Mid and Far North regions.

The whole proess of working with the Kaiako and Kaiawhina has been very exciting for me. They picked up the ideas up very quickly and we shared many worth while experiences.

I have since been and visited some of their Kohanga Reo and I am impressed to see the creative ways the workshop ideas are being put into practice.

However, we are still at the icebreaking stage – there is much to learn.

I will now comment on some issues of concern.

I fear the administration of the regulations will straight jacket the whole movement. Kohanga Reo are being forced to make changes in buildings, equipment and programmes which are contrary to their kaupapa.

We need a person on our Early Intervention Staff who has a knowledge and understanding of Tikanga of Tikanga Maori, preferably a fluent Maori speaker. This would obviously improve communication between S.E.S. and the Tangata Whenua.

There are issues in the language area. When Rosemary Hargreaves was Acting District Speech Language Therapist earlier this year, she noted that speech-language therapy assessment and programme materials are all in English - there is a need to formulate tests and programmes which reflect cultural differences and where appropriate, in Maori.

Rosemary also identified that a child with a language difficulty will have a problem in every language. It's hard to expect such a child to learn more than one language. Care needs to be taken to choose the most appropriate language as the teaching medium. This can create a dilemma in some situations, particularly if a child is taught Maori in the Kohanga Reo, and English is spoken at home.

Some parents want English for their children as well, and some are afraid their children will feel lost when they start primary school. There are a growing number of bilingual and total immersion classes now operating in Northland schools. Gordon Dryden reporting on Total Immersion Classes on television the other night showed that these children pick up the major language within about one year. Further more he reported on a serious breakdown in communication in families where the mother tongue is not taught, as the generation cease to talk to each other.

My focus with regard to the Kohanga Reo is catering effectively for the learning of children with **special needs**.

This means setting up the learning environment so that these children are exposed to experiences that are meaningful and relevant to the child's life and developmental age. So that they utilise all their senses. Not only what they see and hear, taste, touch, and smell. Bob Samples in his book "Open Mind Whole Mind" talks about other senses through which children learn - temperature, pain, repetitive movement, imagery etc.

Rita Walker in her inspiring workshop showed how Kohanga Reo kaupapa utilised nature and the universe as it's curriculum. Children need to talk about the things they touch, and the things they experience. The resulting language becomes a functional language leading to creative ideas. Children can talk about "What happens next", "What if", rather than just the rote learning of colours and numbers.

So they are encouraged to interact with people and objects.

Although I believe in self-motivated play, and that children should be given opportunities to make choices, children with disabilities need more guidance, encouragement and specialised teaching. They need accepting and loving staff, and accept children Kohanga Reo certainly do. Show me a Kohanga Reo that refuses entry to a child because he is too young or too old, resources not in place, no letter from the association, no psychologists report ..... etc etc.

I believe that the local Tino Rangatiratanga are looking to designate a suitable person to specialise in special needs for Te Kohanga Reo that we can help to train.

At present in Tai Tokerau there is a recognition that with the education of children with special needs, it's in the best interests of the children, and their families to use people who have the skills and experience, no matter what their culture.

I would hope that we can encourage suitable Maori applicants to do the "Education of Children with Special Needs in Early Childhood" Course at Auckland Teachers' College – so that in the future they can design their own services.

My vision is that the partnership will deepen, and strengthen, as I still have much to learn, about aroha, mana, manaki, mauri and wairua. The Tangata whenua have gifts and insights which I am only just beginning to understand.

## KARAKIA

E tupu e rea
I nga ra o te Ao

Ko tou ringaringa
Ki nga rakau o te Pakeha
Hei oranga mo tou tinana

Ko tou wairua
Ki te Atua
Nana nei nga mea Katoa

Grow o tender child in the days of your world
Your hands to the implements of the Pakeha
As a way of life for your body
Your spirit to the Almighty God who is the giver
of all things.

Noho ora mai a tutaki noa a te wa

# Indigenous Bilingual EC Programmes in Aotearoa, Wales and the US.

Tony Holmes

E rangatira ma, e nga tangata whenua o Aotearoa tena ra koutou.
E nga hau e wha, tena koutou, tena koutou, kia ora koutou katoa.
Te whakatauki o te hui nei, "Toi te kupu, toi te mana, toi te whenua!"

During 1988 and 1989 I visited early childhood language programmes for indigenes in Wales and the US to compare them with developments in Aotearoa. In looking at early childhood language programmes I have focussed on the under 5's but it is necessary to consider childrens' progress into the primary school to at least age 8 to provide an adequate perspective on language aquisition. By indigeneous I mean those peoples who define themselves as such. That is, Maori in Aotearoa, the Welsh in Wales and Native Americans or American Indians in The US. Firstly, I will define and describe what I mean by a bicultural and a bilingual programme, their desirability and advantages. Secondly, the background leading up to current situation in Aotearoa. Thirdly, what I found out from my visits to Wales and the US. And lastly, what I learnt from these programmes.

## 1. What is a bicultural and a bilingual programme? Why are they desirable? What are their advantages?

Joan Metge defines a bicultural programme as one intended to promote an acknowledgement of the way in which the people of each culture live their lives, communicate with each other and make sense of their world - their system of symbols and meanings, values, behaviour, attitudes and language. (Metge, J, 1980) This was the intention of the Taha Maori programme(Dept of Educ 1984). When the programme involves the learning of the minority language the programme would then become a bilingual one. That is, a bilingual programme would be one intended to promote bilingualism either by the predominant use of a minority group language (immersion or single-medium) or by the use of two languages (or dual-medium) as the media of instruction, i.e. the curriculum is taught through the languages(Holmes, J, 1984). In Aotearoa the kohanga reo are an example of the first type, some primary schools' bilingual classes are examples of the second. Even where the teaching is completely through the minority language the programme is still defined as bilingual because the language of the dominant culture is usually in use before and after school or centre time, during breaks, in the community and maybe at home.

In Aotearoa bilingual programmes are desirable so that all Maori children can learn their language and about their culture. These programmes attempt to address what the Waitangi Tribunal described as the "dismal failure" of the education system in catering for the needs of Maori children (1986). The Maori language is a unique taonga or treasure of a people whose only home is here in Aotearoa. It is the only and essential vehicle for the transmission of Maori values, skills, knowledge, history, poetry and song- in short, the culture. Only te Reo can fully express the Maori way of life, represent and symbolise the culture, and allow the culture to be realised(Fishman,1984).

The beneficial outcomes of extended teaching through the child's native language have been documented by Jim Cummins, a recognised world authority on bilingual education. The longer a child is exposed to, and taught in his/her first language, the greater are his/her chances of high academic achievement, a positive self-image, and cultural security when a second language is introduced. The native language should be used as the principal medium of instruction througout the early childhood and school years, and culturally appropriate content, materials and methods should be used. The second language can then be progressively introduced from around age 7-8 years until it becomes the more widely used language of instruction, but the native language continues to play a major role in the school and the community. Generally speaking, at least 5-6 years are needed to achieve mastery of both languages. ( Cummins, 1982).

These programmes are advantageous not only to Maori children but also to Pakeha and other tauiwi children. This knowledge can enrich us both individually and as a society. We can develop a deeper appreciation and understanding of Maori language and culture, and more positive cross-cultural interpersonal relations. Maybe the disruption and sadness over the claim, or was it theft, of Billy T James body need not have occurred? We would also have greater access to literature and other cultural treasures, and it would help in our progress towards a multicultural society.

Children who have sucessfully experienced bilingual programmes can read and communicate in two languages. There is strong evidence from a number of countries that when their bilingualism is valued and regarded positively, these children often surpass the cognitive, creative, and academic achievements of monolingual children, i.e. bilingualism does not impede the aquisition of academic skills, but enhances them.
(Benton,1977, 1989; Cummins, 1981).

So the advantages can be summarised as increased rights of access by Maori to their language and culture-the social justice argument, individual and societal enrichment, and more harmonious cultural relationships, and enhanced academic achievement.

### 2. The history of subversion of Maori educational initiatives.

This history of Maori education has been one of the denial of Maori rights and educational needs through the subversion of Maori aspirations. Educational policies, many formulated and implemented with the best of intentions, have had disasterous consequencies. Because teachers transmit and legitimate the ideology of the dominant culture to their students, they help determine the way students think, feel, and behave. Traditionally our education system has been seen as having a liberal ideology with egalitarian goals. Equality of opportunity appeared to mean that anyone, whether Maori, Pakeha or other tauiwi, could "get on" with ability and hard work. The longtime hidden class and race divisions, the notion of the classless non-racist society, and the relative affluence of the full-employment economy helped to conceal the true nature of NZ society. Analysis of the deepening economic crisis together with the rise of Maori and women's activism over the last 30 years, has exposed the inherent social contradictions in our society and within our education system. The dominant ideology, although powerful and pervasive, has been challenged and forced to renegotiate in order maintain the consent of those who remain subordinated to Pakeha control.

The so-called "problems" of minority students have been described by Jim Cummins (Cummins, J. and T Skutnabb-Kangas, 1988) as " manifestations of institutionalised racism, ethnicism, classism, and linguicism in society rather than just educators' lack of sensitivity to students' needs." Cummins argues that the power structures in society must be seen as a fundamental causal factor in minority students educational failure, and that the interactions between teachers and minority children reflect this power structure. Strategies for change are therefore futile when when developed from a liberal ideological framework.

This view is supported by Judith Simon (1984) who documented Maori educational policy and its outcomes from 1960 to1980. These polices, although developed to serve Maori interests became ideological in the hands of teachers and administrators, and served instead the interests of the Pakeha in maintaining Pakeha dominance. For example, the integration policy of the Hunn Report(1961) which superceded the long-standing policy of assimilation. The new policy while claiming to support egalitarian principles and to value and preserve Maori culture actually maintained the practice of assimilation. Statistics revealed Maori educational under-achievement, and the Maori child became a "problem." Cultural deprivation, the deficit ideology used to explain this under-achievement, concealed the extent to which the education system caters for Pakeha interests. By focussing on the problem child, for example, through early intervention in the form of increased provision of early childhood education for Maori children, the ideology concealed bias in the system. The concept of cultural deprivation was replaced by cultural difference (NZEI Report, 1967) which shifted the responsibility for under-achievement from the victim(the child) to the school and the education system. In 1974 the Department of Education changed its policy from one of tolerating "cultural difference to the valuing of "cultural diversity'-a multicultural policy-and also said that the responsibility for change was with the Pakeha. Maori language and culture was to be included in the curriculum at all stages. Taha Maori(the Maori perspective) introduced 1984, has also suffered the same fate. It was to be integrated across the total school curriculum, but became just an element within the curriculum. In contrast, Taha Pakeha is the curriculum in the sense that it dominates the whole of centre and school life. These programmes strengthen the Pakeha, because in claiming to fulfil Maori needs, this policy ironically involved itself more with the educaton of Pakeha than with Maori. Like other programmes, its potential to develop Maori self-esteem and cultural pride, and bicultural Pakeha, has been lost. Its failure is a Pakeha responsibility. Maori were not given a strong role in the decision making process involved in the development or implementation of the policy. All these policies have been ideologically subverted to conceal that we have failed to address Maori-Pakeha power relations.

Maori disenchantment with these Pakeha processes has led to the demand for autonomous control over their own educational development. The first move was the creation of Te Kohanga Reo in 1982. At that time I was working at Kokiri Pukeatua in Wainuiomata with Jean Puketapu where the first kohanga was set up in part of an old clothing factory. This grass roots whanau movement was established with help from the Dept of Maori Affairs but largely built independently of government support. This movement has succeeded in teaching the language and culture to Maori children because it provides a total Maori environment for learning. Te Reo is the medium for education. This initiative was partly spurred on by research which indicated that the language would soon be lost. Since 1982 over 700 kohanga reo have been established by Maori communities and approximately 10,000 children currently attend. This compares with the 70-80,000 children in all other early childhood centres. Sadly, most of these children move on to primary schools which have little or no provision for continuing their education in Maori. Most five year old Maori primary school new entrants who are fluent in their native language lose most of what they have learned in the first 6 months at school. When my younger son first went to school he was impressed by his new friend from kohanga who could speak Maori. This child was used as a living language resource in the new entrants class, but lacking support and being the only Maori speaker in the class, his language quickly disappeared. The Te Kohanga Reo Review (Sept 1988) reported that "there is widespread dissatisfaction with schools' inability to provide for the continuation of the kaupapa, and lack of value accorded the Maori langauge and culture." Since 1977 only 11 bilingual schools, around 100 bilingual units and classes in schools and very recently a small number of Kura Kaupapa Maori have been set up to cater for this need. This has resulted in about 5% of Maori children (Benton, 1989) attending schools in which Maori will, or will eventually, have the same status as English.

## 3. Indigeneous Bilingual Early Childhood Programmes in Wales and the US.

In Australia, North America, Wales, Ireland and in Scotland, English language and Anglo-Celtic culture is dominant, and English is the first language of the majority of the native peoples. Like the Maori in NZ, the colonial history of these indigenous peoples has been one of dishonoured treaties, warfare, land seizures and near cultural genocide. The American Indians and the Australian Aborigines, like the Maori, were expected to die out by the 20th century. Subsequent educational policies in all these lands have been assimilationist, and the use of English in schools was enforced by threat of, and use of, corporal punishment.

From the programmes I saw overseas there is good news and bad. My visits to the Pueblos, Navajo, Moutain Ute and the Lakota Sioux reservations found programmes which were assimilationist in practice. There was no evidence of the successesful programmes supporting Navajo language and culture in reservation Head-Start pre-schools reported in the journals in the late 70s and early 80s (Spolsky, B, 1982). It was only on the Crow reservation around Pryor, Montana where I found most of the children speaking their native language as their first language- around 85% of them. The language is widely used in the home and supported in the pre-schools, the schools and the community. Crow speakers do not defer to English in the presence of non-Crow English speakers. This is a strong measure of self-esteem and the status of the language. But even here in one of the probably few remaining heartlands of Indian culture parents are increasingly using their poor English to teach their children rather than through their own language. This results in poor language skills in both languages.

Now almost all of the EC programs for American Indians are federally funded through the Head-Start program. Although these programs now claim to actively support native cultures and languages-they were initially set up with a deficit ideology to give Indians a "Head-Start" in the Anglo-American education system-in practice the attitudes and behaviour of the majority of teachers I observed (both Anglo and Native American), the inadequate provision of resources, and the structural and financial constraints imposed by Head-Start, and the Bureau of Indian Affairs (BIA) ensured that these programs remained assimilationist, ie "transitional" to English language usage and Anglo-American culture.

For example, at the Navajo Head-Starts I visited children were assessed using the Head-Start Measures Battery-a series of narrowly focussed tests oriented towards "school learning" and administered by requiring the children to sit for long testing periods. As has been described by

Zigler and Raver in their May 1991 article in Young Children those children who have been sucessful in these tests have been those who had been given curricula which matched the tests. This "teaching to the test" is bad enough within one culture but when standardised tests are applied cross-culturally there can be no "right" answers for the children to succeed. I was shown tests which used "The Three Bears and "Little Red Riding Hood" in the language section for Navajo children. Other tests involved perception, maths, science and family and social networks. None appeared to make any concessions to the native culture. Concern over these and similar measures involving the mis-use and cultural inappropriateness of these types of standardised tests has also been expressed by the National Association for the Education of Young Children and the National Association of Early Childhood Specialists in State Depts of Education(Hymes 1988). The only conclusion which I could draw is that the tribal identity, and the mana of American Indian children continues to be undermined so that they can be educated for life in Anglo-America.

It is clear that the good intentions of policymakers have most often become discriminatory in practice and in many places continue to destroy native languages and cultures. Part of the tragedy has been that many of the native peoples themselves have rejected or dismissed the importance of maintaining or learning about their own language and culture becuuse they believed that their own and their childrens' future would be best served by learning about the language and culture of the dominant society. Parents wanted their children to learn English and the Anglo way because they saw their life chances improved by this. But at the same time this meant the exclusion of the very nature or essence of these people-their language and culture- from the school and from public life. In the US, without full Indian self-determination I don't see that further decline and loss of American Indian languages and culture can be avoided.

By contrast, in Wales, Welsh control over educational resources has enabled full implementation of bilingual policies in community pre-schools, nursery, primary, and secondary schools, and tertiary institutions. Wales has has made enormous progress in recent times in promoting its language and culture. Although the Welsh were colonised 700 years ago, inequities still remain and many of the people feel that their country is still occupied. For example, outside the Gwynedd County Education Offices there is a slate monolith topped with a sculptured eagle and inscribed with a celtic cross and the words "To the last Prince of Wales, 1282." Opposite is the door of Caernarvon castle with a notice stating that the castle is the property of Her Majesty, the Queen. The dominance of English resulted in a decline in the use of the native language up to the 1960s. Since that time there has been growth mainly due to school and pre-school bilingual programmes.

Welsh speakers are predominantly found in Gwynedd and Dyfed the most northern and western region of the country. In these "heartlands", which can be compared to parts of te Tai Rawhiti/E Cape area and te Tai Tokerau/Northland, more than 60% of the people speak Welsh. In the Anglicised and industrial SE only 10% do.

The first Welsh-medium school was set up in 1939, and the first official school in 1948. The end of the 50s and the early 60s marked the beginning of the rise of Welsh-medium education. These schools follow a similar programme to the Maori bilingual schools. They are predominantly for children with English as their first language. Welsh is the single-medium for teaching in the junior years. English is introduced at age 7, i.e. the programme becomes dual-medium with 40% of the curriculum is taught through English by age 11. Overall there are no adverse effects on achievement in English.

There are also several hundred bilingual schools where Welsh is the medium of instruction for 40-50% of the school day. Again there have been no adverse cognitive or linguistic effects compared to monolingual English curriculum control groups, but for these children the level of Welsh attained was lower than that in the Welsh-medium schools.

In Wales, as in the rest of Britain, many children attend Nursery Classes or Schools from 3 or 4 years old. Some Nursery groups are Welsh-medium, some have teaching in Welsh. But the Mudiad Ysgolion Meithrin (MYM) /Welsh-medium Nursery Schools and Playgroups Association is the dynamic force in Welsh-medium pre-school education. These are Welsh immersion programmes for children whose first language is English(only 5-10 groups out of over 400 are in communities where Welsh is the children's first language) All the teachers are fluent Welsh speakers. Between 1944(The Education Act) and 1965 Welsh-medium preschool education was wholly voluntary, and provision extremely fragmented and confined to industrial S Wales and Mon/Angelsey. The increased status of Welsh-medium education in the late 60s resulted in over 70 groups by 1970. In 1971 these groups united to become Mudiad Ysgolion Meithrin. Welsh Office (ie government) funding has been provided since 1975 and by 1985 there were 433 schools, and 199 parent-toddler groups catering for nearly 6,000 children. From these figures you can see that the Kohanga has grown at a phenomenal rate since 1982, faster than the Ysgolian Meithrin, but the difference is that in Wales children can continue their Welsh education in bilingual schools.

In Wales the most significant developments which have relevance to the NZ situation can be summarised as:

1. Welsh language is available in all schools(i.e. from age 3 in nursery classes). Welsh is part of the new National Curriculum and every school child will receive some teaching in Welsh.

2. Establishment of Language Centres for English speaking immigrants. These centres provide immersion in Welsh for children from age 7-11(4-6 year olds go straight into school) for a short period of intense language instruction to enable them to integrate into the life of the local Welsh school and community. This also prevents these new children from undermining the language programme with too much English usage. The centres are well resourced, with specialist language teachers, a generous teacher-student ratio(1:10) and small groups. This sort of exposure to a second language is a most effective method to aquire Welsh. Progress is rapid and the children move to the local school after only one term competent and confident enough in their new language to cope in the classroom.
3. Growth of government support for Mudiad Ysgolian Meithrin-
Welsh-medium pre-school language nests.

4.Financial incentives for students and teachers being trained through the medium of Welsh.

5.Welsh used as the language of examinations.
Welsh is one of the languages of examinations. There is a Welsh Examinations Board. In 1985, 34 "O" level subjects, 37 CSE options and 16 "A" level choices were sat by more than 7,000 students. (TLS, p 3, 23.1.85)

6.Extensive publishing in Welsh-children's books, novels, and textbooks through the Welsh Books Council (350-400 books each year, about 100 of which are childrens books) and The Welsh Joint Education Committee(40-50 textbooks each year) A highly efficient cooordinated system from schools' orders through publishing runs to delivery to schools ensures that print needs are met.

7. Extensive "prime-time" TV and radio in Welsh.
Welsh is prominent in the media, in Welsh-language feature films, and TV films-one or two have made it to NZ. There is also TV and radio news, childrens' programmes, schools programmes, and further education programmes, including about 4 hrs "prime time" TV from 6-10 pm each day.

8. Parents desire for their children to learn Welsh, and learn through Welsh. Welsh parents have seen the positive effects of bilingual education, and are no longer fearful about the effects on their children's educational achievement. They are convinced of the benefits of a bilingual education for their children.

## 4. What can we learn from these programmes in Wales and the US?

In Aotearoa we have a number of advantages which make our bicultural goals more easily attainable than in many other parts of the world. We have two flourishing major cultures. The cultures of many other colonised peoples have been so decimated that they are unlikely to survive. Maori have tribal cultures and language dialects that are mutually intelligible- there is one Maori language. In other countries there are often many different indigenous languages. For example, this contrast is clear in comparing Wales and Aotearoa (1 language ) with the American Indians and the Australian Aboriginals(100's of tribes and languages).

Now this is good news for the maintainance of the language, and in terms of the production of resources, but unless the programmes serve the true interests of the minority group, and are perceived in that way by the indigeneous community themselves-not those of the majority as perceived by majority group educaters, as has mainly been the case up to the present, they have little chance of success. And they must be backed up by adequate resources to see them through. (Look at the Welsh resources just described.)

This brings us back to the question of social justice and to the Treaty of Waitangi. Because Maori and the Crown are unable to agree on the rights conferred in Articles 1 and 2 of the Treaty they are unable to agree on the fair allocation of educational and other resources. Maori claim that in 1840 they had agreed to a partnership with a Pakeha minority which retained Maori sovereignty and possession of their taonga. Since that time Pakeha have become the majority and have used their democratic power and force of law to alienate Maori from their language, their culture, and their land.

From the Welsh experience it is clear that real progress is possible by providing for Maori control of their own educational resources. In the US and in NZ bilingual/bicultural educational initiatives have been constrained and undermined by successive governments and their agents. Te Kohanga Reo has challenged all of us to provide for the needs of Maori children beyond early childhood and into primary education and beyond.

For the small number of children from homes where the first language is Maori, and for Kohanga Reo children, the most effective school education is through the medium of Maori language. (Benton, R, 1988) Following kohanga reo, it is imperative that bilingual primary programmes are available to at least Std 3, or about age 8, if these children are not to lose their knowledge and proficiency in the langauge, and have their self-esteem and academic potential diminished.

To achieve these goals substantial additional numbers of primary schools would have to set up bilingual units, or Maori communities would have to establish more Kura Kaupapa Maori. What is clear is that the alternative of submersion back into a totally English environment after Kohange Reo-which is what happens to most of these children- actually places these children at greater risk. They have built up strengths in Maori and now find themselves in an environment where their Maori is suppressed. The negative effects on achievement and cognitive growth are compounded. The transition to, or back to, English results in assimilation to English monolingualism. Many of the American Indian programmes demonstrate this.

Our own government is clearly non-supportive. The latest draft curriculum document (Draft National Curriculum of NZ-a Discussion Document, MoE 1991) no longer refers to the Treaty or to partnership. The Charter Treaty requirement has now been removed, and, although many centres and schools are still honouring their charter, this move has made it easy for others to abandon the Treaty. Schools are expected to "provide" for Maori language teaching but gone is the "committment" to integrate tikanga Maori across the curriculum. The curriculum itself has been displaced and narrowed to accommodate a science/technology bias which will ease the introduction of standardised testing and which at the same time further marginalises the arts and the teaching of Maori language and culture. This will certainly adversely affect bicultural goals and programmes. How long will it be before the early childhood curriculum comes under the spotlight.? Up to now early childhood centres have retained autonomy over their curriculum. We are now vulnerable. Could early childhood end up with a narrow curriculum and teach to the test like the Head-Start Measures Batteries? Michael Apple, a visiting US professor of education, warned us about becoming, "a tool of conservative politics" back in 1983. In 1991, Apple's concerns are beginning to be realised.

As well as these constraints the setting up of language units within primary schools is fraught with additional difficulties. With the government's intention to fund schools at a minimum level there won't be sufficient funds to support existing programmes, and I believe that not many schools will choose to spend on a Maori language programme. Even though the language programme could be justified on equity grounds (i.e. biculturalism in education is concerned with the rights of access to educational resources. It is a Treaty issue and a principal equity issue in education) it would be at the expense of other programmes within the school. Couple this with de-zoning and there exists the possibility of "white flight" where parents may choose another school which doesn't "waste" its resources on "that Maori stuff!" This could have serious consequencies for the viability of schools.

So although Picot suggested that Maori would "have considerably more scope" to influence education through the creation of charters which reflect their needs," in practice this has not happened. The democratic process has defeated, and will continue to defeat, minority Maori interests, and frustrate the working out of the Treaty partnership. I think that the only viable and certain means of meeting Maori aspirations for the teaching and maintainace of te reo and te tikanga is through institutions with a Maori pedagogy or kaupapa Maori, that is Te Kohanga Reo followed by Kura Kaupapa. With our support Maori will overcome the structural and financial constraints imposed on them by government, and will not suffer from prejudicial attitudes, and the discriminatory treatment which has been well documented by researchers like Judith Simon, Alison St George, Courtney Cazden and Marie Clay.

Our role is to firstly find out how best to support Maori self-determination in education, so that as Wally Penetito has said, "Maori children can repossess their own language and custom by relearning on their own terms what it is that belongs to them." Secondly, to take responsibility in working for a bicultural education system, including bicultural programmes in our own centres and schools. Maori are, after all, already bicultural, some are bilingual. Pakeha and other tauiwi are the ones who need to become bi- or tri-cultural. And, thirdly, to be advocates for a bicultural Aotearoa by working with parents, policy makers and politicians.

No reira, kia mau, kia u, kia kaha ra, ki nga tikanga rua o Aotearoa.
Tena ra koutou katoa.

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# PARENT INVOLVEMENT AND SELF-MANAGEMENT IN AN ABORIGINAL PRESCHOOL

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## Abstract

(a) **Objective:** The aim of this workshop presentation is to describe the practical steps taken, when an all-Aboriginal preschool attained self-management, to build staff confidence and initiative and to increase parent involvement. Opportunity for questions and small group discussion will be given.

(b) **Summary of Content:** The newly appointed Aboriginal director will describe the nature of the preschool community, her need to get to know the families and gain their trust, and her staff development efforts. Next will be an account of the activities which were planned to provide scope for parent involvement and parent-staff interaction, the outcome being a shift from practical help to some feeling of emotional involvement among parents.

Help from the local TAFE college resulted in the running of a workshop series designed to build parents' awareness and skills even further, with the aim that some mothers would decide to undertake training for a Child Care Certificate.

Now that this preschool has been autonomous for more than four years, the flow-on benefits will be mentioned, as well as the next steps which need to be taken.

(c) **Importance:** Some arguments against parent involvement are that parents, especially poorly educated ones, have nothing to offer, that only highly trained people should be involved in curriculum, teaching and administration, and that conflicts from the community will be introduced into the preschool, causing division and disharmony.

This presentation aims to show that by involving parents at an appropriate level, they make a valuable contribution to the preschool, they increase their own knowledge, skills and self-esteem in the process, and some come to place a higher value on the importance of education generally.

(d) **Theme:** The need for improved parent involvement in an Aboriginal preschool following from the policy change from outside control to self-management.

In this workshop presentation I plan to describe the steps we have taken in Minimbah Aboriginal Preschool in country New South Wales following the shift in 1987 to self-management. We now have an all-Aboriginal staff and management committee. As you can see, I am the last person who could try to be a 'new broom', sweeping in quickly with changes that parents, staff and children would find too much to cope with. Instead, I set my mind on what I wanted to achieve in the long term. Then I moved slowly, step by step, as each opportunity came, to build staff confidence and initiative, and to give parents space to become involved. They became involved not only on the management committee but also in the day-to-day running of the school.

I will start by setting the scene and giving some background information about the community where our preschool is.

Armidale is a rural city with a population of 21,500 people. For more than a hundred years it has been an important educational centre, with boarding schools, a teachers' college and a university. Over the past twenty years, since I have lived there and worked in the Aboriginal preschool, the Aboriginal population has gradually increased from about 600 people to about 1,200 at present.

Most families live in government or privately rented houses throughout the town, while there are twenty-four households on the small Reserve on the edge of the town where the preschool is located.

At present there are only four people in regular employment from these twenty-four Reserve households. Educational achievement is still very low among these Reserve people, though it is gradually improving among 'town' families.

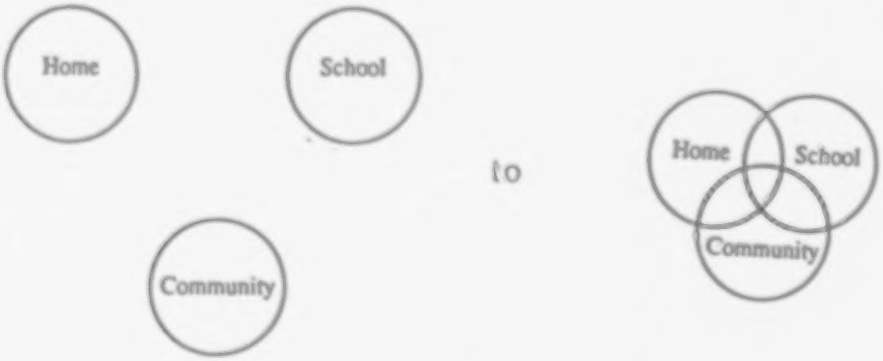
The young parents of our preschoolers at the present time were among the first children to attend the preschool in its early days. Minimbah Aboriginal Preschool was started in 1963, run by the Save the Children Fund with a non-Aboriginal director. Under the present government policy of self-management the preschool was handed over to a local management committee of Aboriginal parents in 1987, when I had completed by Diploma in Teaching and was appointed the first Aboriginal director.

The present enrolment at the preschool is 60 children, including five non-Aboriginal children. There are 10 Aboriginal staff members, most of whom are employed on a part-time basis.

The children who are sent to our preschool are taking their first steps outside of their families into the wider community. I felt that my first task was to build the parents' trust in me, as an Aboriginal person taking on the full responsibility of running the preschool. I then set out, in a very subtle way, to design activities for parents that would raise their awareness and make the children's adjustment to preschool smooth and easy.

At first I was blinded by blocks and hindrances met by earlier teachers and others working in the school. I had to start from 'square one' by sitting and thinking: 'What would happen if I fail, as an Aboriginal person?' I then realized that I faced a challenge. Although I had worked in the preschool as an assistant for eighteen years, it was a new situation to me once I became qualified. My fear: Will the Aboriginal people accept me? Will non-Aboriginal parents still send their children to the school? I still felt an outsider here. I needed to get to know the people in the Armidale Aboriginal community in a more active way.

To get to know the people of the community I needed to get the centre operating in a way that the parents felt comfortable with - comfortable about coming into this environment. I had to set up the school and have the staff working as a team. This had been my vision for many years. I wanted to move from:



Another shift I wanted to make was from a vertical hierarchical structure where the Director took all of the responsibility to a horizontal participatory structure where responsibilities were delegated and shared. My method was to ask every person who works in this centre to take responsibility for their own teaching or other duties and tasks. I often stressed to staff that I'd always be there and available, for advice. I also realized that because I am a Koori (Aboriginal), I knew and understood what was happening in the community, for example, concerning factional problems. I knew, too, how my people operate and manipulate.

This in turn gave me the opportunity of saying to parents that if there is a problem with a staff member, please come and discuss the matter with me. The hardest thing I had to explain to parents was that I had no control over, or responsibility for, staff members outside of working hours. (Mission managers in earlier times had control over people twenty-four hours a day.)

Once the staff knew we were operating as a team, then this team effort led to a freeing up of staff and a welcoming to anyone who came to the preschool.

My next aim was to get parents into the school, bypassing any problem that existed between parents and staff members that originated outside the school. Any outside differences between staff members had to be left 'outside the door'. Making this clear from the beginning avoided any problems later. I needed to be both firm and understanding.

At the start of each term, at our first staff meeting, the importance of teamwork was stressed. Kinship loyalties are still a big reality and staff members have learned to sidestep conflicts and help each other out when an awkward situation arises over welcoming someone into the school.

When I felt it was the right time that parents would feel welcomed into the school, I started thinking about new programs or activities that would be suitable for our centre.

What was going to be beneficial to these parents and other relatives? I knew that older relatives want the best for their children and grandchildren, so by getting **their** interest, they would pass it on to the next generation of young parents. I believed that the local adults had every minute of the day available to participate in programs, to come to the school, to do things that I was interested in. It came as a big shock to me to realize, when I started out planning the time, that these parents already had their agenda set out for the whole day while their children were away at preschool: time for going down town . . . for playing bingo . . . for playing cards . . . their social activities were just as important to **them** as setting up a program within the school environment was important to me. The first thought in my planning was to design something that wouldn't clash with their social/leisure activities.

The next step was to arrange a social function, at night. This was the children's Christmas play performance. I decided to hold this away from the centre because it seemed to me that most Aboriginal people still perceived schools in a negative way.

Previously the preschool had always provided the costumes for the Christmas play. I decided to send a note home to the parents asking each parent to design their child's costume, at the same time knowing that quite a few of these parents would not be able to afford to buy materials for their costumes. I then invited parents to come in and use the preschool equipment: cardboard, scissors, textas, staplers etc. So without them realizing it, several of the parents came and asked myself and the other teachers for advice on how to make the costumes. There were only a few parents who used the preschool equipment, but all parents on the night of the play had costumes made for their children.

I was astounded, as were other members of staff, to see how skilful and creative these parents were. Many comments related to the mending of the breakdown between the home and the school environments that had occurred. Teachers were saying, 'Isn't that a delightful star! . . .' Parents were standing there feeling very, very proud.

On the night of the play at least one representative from each family in the school came to the performance. Parents were talking openly to all members of staff. I introduced all members of staff to the parents and explained which group each person would be teaching in the following year.

After that night I felt that the barrier between the parents and the preschool had become a bit lower, and that I would still have to work very carefully to build more confidence in both the parents and the staff.

Meeting mothers down the street later was my ideal opportunity to comment on the costumes that they had made. 'Who did you get to make that magnificent angel costume?' I asked one mother. 'Oh, I made it', came the shy reply. Out came the further information from this mother that she had a sewing machine at home, so I started to think about what sewing we needed at school. The first things were table cloths. Aprons needed to be mended. Curtains were needed for the dollies' corner. This young mother then came out to the school and measured up for six small table cloths which she made at home, brought back to school and enjoyed seeing the children eating from the cloth-covered tables. Her child boasted about 'what my Mummy made'. The sewing was one means of getting that mother and several others involved. They were also able to repair some broken toys.

Following from the Christmas play, another mother offered to knit a children's cardigan in black, red and yellow (the colours of our Aboriginal flag) which she then donated to be raffled. The Mothers' Club provided the money to buy the wool and they raised $172 from the raffle. Several other similar efforts followed from this one.

I thought, 'Now this is my beginning of getting parents to come into the school.' It came at the end of my first year as Director.

For the raffle mentioned above I gave one of the mothers the preschool cheque book to go and buy the wool, stating that it was important to bring back a receipt so that it would be clear I wasn't robbing their committee and that I was leaving them the responsibility for their funds. When the mothers brought the receipt back to school I showed them how it was then pasted onto a piece of paper showing the names of the parents who bought the wool and the amount spent.

I have described this because to this day I have never once needed to ask any parent to go back to a shop to get a receipt. Again I felt that some parents were starting to feel involved. I have been able to show parents how they have spent $50 to buy drinks and chips for resale and have made only $5 profit. I have explained how they could look for cheaper brands, to cut costs and increase profits. This has been very, very successful because each time I asked parents to arrange a function or to do something, I always chose parents who were friendly with one another. Even organizing a simple raffle has involved up to five parents and has involved them in meaningful tasks. I believed now that these parents would feel confident in coming to the centre on a regular basis.

Because there were four staff members who were going away regularly to do their Child Care Certificate course, I now needed to have someone working for me to fill the gaps. I asked parents to volunteer their time to come in and work while the student staff members were away. After observing the parents who came over several weeks, I felt that the job that they were doing was at a standard where they were able to carry out tasks and prepare themselves in a practical way for enrolling in the Child Care Certificate course themselves. I realized the need for this because we were regularly having new parents. This voluntary help served as a pre-orientation program for those parents who decided to later enrol in a course.

When the parents came into the school I found that I was spending a lot of time telling them what I wanted them to do. I decided then that I would plan a series of five one-day workshops, on pupil-free days, that would teach or make parents aware of what needed to be done in our centre. I approached the local College of Technical and Further Education through the Child Care Co-ordinator, and discussed a program that would be suitable for these parents. I knew that quite a few of them may have difficulty in comprehending too much written material - so the more practical the program was, the better it would be. For example, we showed them how to make playdough, how to set up a playground for the three-year-old group, or for the four-year-olds whose needs are different.

When notices were sent out to the parents I clearly stated that there would not be very much written work. In discussing it with the TAFE lecturer, we decided that we were going to use gross motor skills and would also work on language development. We would use only a limited number of formal terms so that we would not frighten parents off. This strategy seemed necessary and proved to be effective.

The workshop series was open not only to the mothers but also to the fathers and any other interested family members. Several fathers and grandmothers attended.

In one workshop we demonstrated one role of a parent on the preschool's management committee through setting up a role play. In discussion with the 'secretary' and 'president', the responsibilities of the treasurer were described. They talked about the jobs that the treasurer must do in the day-to-day running of the preschool and in preparing for each monthly meeting.

For one workshop we took participants on an excursion to Tamworth, a bigger city 100 km away, to visit another all-Aboriginal preschool. One aim of mine here was to provide the opportunity for interaction between staff and parents by allowing a couple of hours for shopping after the preschool visit.

We wanted parents and others to see a preschool operating where there was an all-Aboriginal staff. They immediately compared the Tamworth preschool with their own, which they now came to feel was very good. The flow-on was that for the first time they came to feel that Minimbah was **their** preschool, and something to be proud of. Up until then I felt they had been detached. So parent involvement was increased at a new and different level. Some emotional involvement now went along with practical involvement.

After the first three workshops, people started to come in and work for me when student staff were away. The response to my requests for relief help was overwhelming, and the work was voluntary in the beginning. This further suggested to me that the level of involvement had increased significantly. I didn't have to detail the tasks because other staff were now open, confident, ready and able to use their initiative to do this.

Choosing the relief staff members relates back to knowing the local community. When two permanent staff members were going off for training I needed to choose either two replacements from the local Reserve who were friendly with one another, or two people from the town.

Our regular bus helper who was also our 'fee collector' was going off, so we now needed a parent to act as bus helper. Parents had seen and realized how careful and how accurate 'Verna' had been in collecting their money so they now knew what was required of them in handling other people's money. They now 'got the message' about responsibility with money from the other side. They now wanted also to be trusted. An exercise book is kept in the bus where the helper records the names, dates and amounts after opening envelopes and counting the money. It can then be checked when handed in at school.

When parents saw a staff member explain this fee-collecting task, someone not able to read and write came to me, quietly and without embarrassment, and offered to do an alternative job. It seemed I had gained her trust.

From the workshop series I gained a better idea of parents' capabilities so I was able later to match willing parents with suitable tasks where they could experience pride and success.

At the later workshops we asked for an evaluation sheet to be filled in so that I could encourage (or push) those I felt were able to enrol in a training course. People who couldn't fill out the evaluation sheet came and asked me to write down for them what their thoughts and ideas were. I felt we had achieved enough sense of security for these people to acknowledge their limitations and still want to contribute their practical support.

There is a recent event that I would like to include in this description of community input to our preschool.

For all sorts of reasons, quite a large number of Aboriginal people appear in the local court, usually on minor offences, for which the penalty is so many hours of community service. Several months ago I was asked to provide a community service placement for a young local woman who had been charged with offensive behaviour, assault and damaging property. This was a big challenge to me, because not only did I have to face the parents of the children in the preschool if I took her, but also other families from the Aboriginal community, including my own, who had all experienced factional problems from this girl and members of her extended family. Other Aboriginal organizations had already been approached and had refused to take on 'Julia' (not her real name).

At that time I was trying to work out how to get the members of her faction to become involved by sending their children to the preschool. I wondered how I could break down the wall of misunderstanding that separated them from the rest of the Aboriginal community. It seemed that no matter what was said or done, members of that clan took it the wrong way.

It only took me one day to decide that I would give Julia an opportunity. She then worked eighteen hours a week for about three months to complete her sentence. She started with the task of getting to know the staff. She learned to carry out many day-to-day tasks and related very well to the children. Staff members gradually acknowledged that Julia was a nice person.

At the end of the period, Julia's own reporting back to her parole officer was that she was a worthwhile person, a new discovery to her. One outcome was that she volunteered to go to a residential hostel where an alcohol rehabilitation program is offered. Enrolments from several families from that clan have now followed. This means that children are now having opportunities that they were missing out on before. Now when I meet members of that clan they always smile and say 'hello', perhaps showing that they no longer feel so much anger and rejection.

Over the years I have heard arguments against parent involvement. One of these was the negative expectation from some non-Aboriginal people and some Aboriginal staff members that you cannot get 'blackfellers' to school. Others thought that Aboriginal parents had nothing to offer. My experience has proved this to be untrue.

I have found that by giving parents opportunities and building their trust, they have done what they were able to, to contribute to the preschool. My basic idea was to equip these parents with knowledge and skills of how the wider system operates through their growing understanding and involvement in the running of their preschool. Some parents have become more aware of the value of education and have been able to assess the social development of their own children in relation to non-Aboriginal children of the same age, and in terms of their readiness for school. (I could begin another story there . . .)

One hope that I have for the future is that when I retire, another Aboriginal person will be qualified and ready to fill my position. I hope there will be people qualified for similar positions in other Aboriginal preschools. There is still some way to go for Aboriginal parents in Armidale and in other places to **want** responsibility and to **want** to be accountable for the successful management of our preschools. Until they **want** it, it won't happen.

# THE GREENLANE EXPERIENCE

Carol Bolton
Hospital Play Specialist, Greenlane Hospital

## What We Had - The Early Years

Since the middle of the 20th century there have been enormous changes in the care of children in hospital. Personally and professionally I have experienced these changes. As a hospital play specialist at the Greenlane Paediatric Cardiology unit since 1979, I have been involved in a unit where dramatic changes have occurred.

In this unit in the early years, for the most part, families were able to provide daily care for their children. However, parents were accommodated at the nurses' home. Open visiting by other members of the family was accepted. In special situations bedside accommodation for a parent would be provided for children who were not breastfed. Parents' beds for children who were in the "nursery" - birth to 6 months - were provided in separate bedrooms. Parents were encouraged to attend the consultants' rounds, and while many did so, only a few families participated as full members of the health care team.

The hospital play programme had been initiated by Auckland Playcentre personnel in a voluntary capacity. Early correspondence notes that the original period was for a 12-month period and after that time the Hospital Management would review the play programme and the funding requirements. Sessions were provided for mornings only.

In 1979 when I joined the staff of this ward, play supervisors - known by other team members and parents as "play ladies" - were employed by the Hospital Management. Both supervisors worked from 9am-12.30pm weekdays, during the school term. The play programme was provided in the room that served as the playroom, diningroom and parent room. The play programme was based on the freeplay model influenced by the training of the play supervisors.

Apart from a model medical kit and a toy hospital, the programme did not address the needs of children and their families in the hospital to have preparation for surgery, or medical treatments, or access to play resources, or information to assist children in understanding what had happened.

At that time, we were just beginning to have access to the overseas literature on the emotional and developmental needs of children in hospital. The ward had a multidisciplinary team model of care for the health care professionals. In Robin McKinlay's "The Care of Children in New Zealand Hospitals" she noted this team approach in the support of families in hospital and felt that this approach could well serve as a model for other hospitals.

However, in 1979, as a member of this team, I was in awe of the "medical professionals in the team" and initially participated in only a limited way - I accessed information and answered queries.

The play supervisor's role, created in 1978 by the Department of Health (known as Pre-school Activities Officers officially), was seen by other professionals as providing play opportunities to keep children under five "happy" - this generally meant not crying. Within the team, at that time I worked in this model.

Once the play supervisors began the move from the "play ladies" role into an educational model, we realised that play could assist children to further understand their hospitalisation. We were beginning to move to the therapeutic model . . .

In 1979 the first national inservice course for staff working in programmes for young children was coordinated jointly by the Children in Hospital Liaison Group (CHLG) and the Department of Education. This course supported the development that therapeutic play programmes were essential services and not "the icing on the cake" for children. Through the CHLG, play staff gained access to overseas literature on therapeutic play programmes in Britain and the USA.

At this time we lacked full understanding of how our commitment to a therapeutic model would impact on the role of play in hospital, the skills we would require for this commitment, and how this decision would impact on other members of the health care team. It was fortunate that this commitment was made at a time when nursing staff were also re-evaluating their role in partnership with families. An environment, positive for creating change, had been created.

Members of the multidisciplinary team provided personal and professional support for the play staff during the transition to a therapeutic play programme. The change of focus within the multidisciplinary team was to family-centred care. Parents and health care professionals were beginning to learn to work as members of the same team.

In 1987, Joseph Williams, Assistant Professor of Therapeutic Recreation at the University of Southern Connecticut, made a study visit to New Zealand. He challenged the professional commitment of New Zealand play staff and their professional title of hospital play supervisors. In an overview of therapeutic play programmes in the USA, he outlined the major goals of these programmes, the philosophy, and the major components of these programmes if they were to succeed in meeting the special needs of children in hospital:

1. trained play specialist
2. equipment and resources
3. play environments
4. acceptance and understanding of the role of the programmes by other team members.

Following his visit, play staff travelled on study leave in Britain, the USA and Australia. Valuable inservice education was accessed. This study leave reinforced our professional commitment to therapeutic play programmes.

Attendance at the Association for the Care of Children's Health Conference and the Child Life Council for the past two years also provided a unique opportunity to gain inservice in all aspects of programming for children in hospital. Attendance also provided professional contacts with other developed programmes.

### Developing the Greenlane Model

Accepting that professional challenge meant evaluation of the total programme. The major aims of a quality therapeutic play programme for hospitalised children and young people are to:

- provide a safe and stimulating play environment;
- provide a programme which recognises the importance of play for growth and development;
- prepare children and their families for hospitalisation and procedures so they may develop coping mechanisms in advance of the experience;
- provide an opportunity for children to further their understanding of their illness, treatment and the hospital environment;
- through medical play, help the child to express misconceptions and to understand his/her illness, treatments and procedures;
- provide outlets to express fears, anxieties and anger, and, with assistance, to attain resolutions;
- provide activities that keep children in touch with their home base as part of their support system;
- support the involvement of parents with the care of their children during treatment, and encourage the parents' involvement in the play programme;
- provide a play programme that recognises the special needs of siblings;
- provide information through observations that is useful to the treatment and care of the child;
- function as a member of the team caring for the child, and establish a working relationship with all staff with whom the child will have contact.

### What We Needed - The Middle Years

Evaluation of the strengths that were supportive of the programme development show that there were six significant factors:

1. A multidisciplinary team - focus from the team was moving to the FAMILY-CENTRED MODEL OF CARE.
2. Employed play staff (two 0.5) with an allocation of funding for equipment and resources.
3. Both play staff members were committed to the same goal - development of a therapeutic model play programme.

4. An environment supportive of positive change in the care of children in hospital. Medical, nursing, administrators, other support services, and the school teacher were already involved in working as a team. The changes that would impact on their services had a forum for discussion. Changes to the existing ward routines were able to be examined, implications considered in respect to the focus of the child and family needs, and a result achieved that utilised the strengths of the team, and could be sustained.
5. Play staff had access to the library/information and support of the CHLG on the psychosocial needs of children and their families in hospital. There was the opportunity for overseas inservice.

What were the developments that needed to take place within the hospital if the major aims of a therapeutic play programme were to be achieved?

1. ***Inservice.*** Play staff had to further develop their skills to facilitate these developments. Through the contact already outlined, and completion of a course on "Therapeutic Communication for Children and Adolescents", staff were able to gain valuable inservice. The lack of appropriate inservice opportunities on the emotional and developmental needs of children is a significant issue that must be addressed in paediatric health care in New Zealand.

2. ***Professional identity.*** Play staff had to establish their professional identity, both personally and within the health care and education systems. It was important to find a common name to identify the unique features of these kind of programmes and their professional workers to ensure clear recognition of their purpose, and to ease communication throughout the medical field when discussing them. In line with developments in Britain and Australia, the title HOSPITAL PLAY SPECIALISTS was selected.

3. ***Service for All Children.*** Programming at the hospital had to be considered in respect of all the children in the hospital, not just the children in the paediatric cardiology ward. (At an inservice planning meeting, 13 areas of contact were identified in the hospital - inpatient, outpatient, service area such as Xray, blood and specific test clinics.) While it was not possible with existing resources, nor to this date possible, planning and yearly evaluation of the programmes must consider this factor. This need must stay on the agenda, otherwise services for all children will not be on Administration projection and development files.

4. ***Resources.*** Development of the specialised play equipment resources required for the preparation programme for surgery and treatments, as well as recreational activities on the ward for older children and siblings.

Resources for children in areas other than paediatric cardiology need to be addressed.

In my travels overseas I have seen that Kiwi ingenuity has equipped us well in the development of medical play equipment.

Play staff were also faced with extending their play resources at a time when budgets were being closely examined.

The skills as a resource person when a playcentre Mum came to the fore.

We have also more clearly identified what donations are helpful to the programme. We have several projects that would not be possible without community support.

The need for calico teaching models to extend the pre-operative programme is an example of creative support:

> A CWI member, working as a volunteer in the hospital, observed a situation where a child wanted to keep one of the six dolls that we had made ourselves for the development of the pre-operative preparation programme. She noted my brief hesitation before giving the child the doll, and later queried why I hadn't wanted to give her the doll. When I explained that it wasn't a question of not wanting to, but that in giving it to her I was in the difficulty that I couldn't make them as fast as the children needed them, her "give me the pattern and I will see what I can do" led to 1400 dolls.

The support of the CWI is a vital factor in this essential programme for children in hospital in Greenlane.

Development of the day stay play programme, where there was no funding in the setting-up budget for play resources, was overcome by the members of the Hospital Auxiliary who provided funding for this project.

5. **Understanding and Acceptance.** Development within the hospital of an understanding and acceptance of the value to play to children in hospital and the delivery of play, to be fully accepted.

In areas where there is no delivery, staff pressure for such delivery is supportive of developments to access funding for programming. Interestingly, originally nursing staff, in particular, felt uncomfortable of being critical of the lack of delivery. They saw the workload we were already completing, and felt that it was not appropriate to press us "personally". This is not a personal issue. Identifying gaps in service supports play staff in their advocacy with management to achieve more effective services. I am confident that in our department we are making the most effective utilisation of all our resources. However, if discussing my priorities can facilitate better services, I feel confident to examine these issues.

A component of the cardiothoracic course now is a module on "Pain is Everybody's Business" - nursing staff must examine the role of the hospital play specialist in relationship to this statement, observe pre-operative play preparation, and examine how children utilised this play preparation when having surgery.

## The 1980s - What We Have

Hospital play specialists provide play programmes for children in the paediatric cardiology ward and the day stay surgical unit. A proposal has been developed for a supervised play programme in the ORL adult/children ward. This will be operational as soon as the "Before Five" funding legislation is passed, and the programme chartered. Play opportunities are available in the three main outpatient clinics. Areas where children have contact are including in their decor, stimulation of interest to children, and not just appropriate to the under fives age group. For example, in the outpatient cardiology clinic, the examination room is an inside room. As part of the decor, children in the cardiology ward made a mural. Using creative materials, the outside was brought inside. The theme of a pond with trees covers the area at the head of the bed, down the wall, and mobiles of appropriate birds etc. hang overhead. Soft toys that fit the theme are scattered in the room.

Hospital play specialists provide a component of the health care of children in the hospital as doctors, nurses, social workers and teachers provide other components.

In the children's cardiac ward, when children are admitted they are usually, after admittance, brought directly to the playroom by their nurse. A period to give children and their parents time to settle after arrival at the hospital has been found to help children cope with the initial examinations and routines. When they are required to go to their rooms, toys from the playroom go with the family. (As part setting-up of individual rooms, a plastic basket with a small selection of activities has already been placed in the bedroom.) The hospital play specialist or the school teacher will, within the first 24 hours, begin with the child making a record of their stay in hospital in a hospital diary book. Together with the making of their hospital doll/teaching model, valuable information on how the child sees their hospital experience is gained by hospital staff, through the play specialist. Children and parents also gain information on the hospital, and how staff see the family role in the ward.

Children are encouraged to "souvenir" for their books. This provides visual tools to help their friends at home understand what has happened in their time in hospital, as well as items that they can use to play "hospital" at home.

Some parents of babies and toddlers will make books for their children at home, or for when their child asks about how they got their scar.

Children will attend either the hospital school programme or the play and recreation programme during the day, and the variable for this will be the child's emotional wellbeing, and the impact of their medical care. Parents are encouraged to participate in both programmes. Programme planning by play specialist and school teacher includes at least once-a-week creative craft activities that will involve children and their parents. Exciting murals, specific interest days, themes are displayed throughout the hospital as a result of this planning.

Art is a central component of the programme in this ward. Because of the therapeutic programme, often art work has a medical or emotional slant. The constant access to resources in the ward, together with the teaching of appropriate skills, empowers the children to express their feelings. Art is also a form of relaxation, builds self-esteem, and can provide a shift in focus from the medical condition.

For school-age children and long-stay patients, regular programmes in the occupational therapy department are planned. This allows children and parents respite from being constantly in the ward environment. "Cooking for Health" is a regular Thursday morning activity. Children then bring back their "goodies" to share with parents and staff, except hamburgers - there is no way these are shared.

Special events are celebrated on the ward, and in the summer ward BBQs frequently happen. Hospital play specialists also coordinate with the Heart Children's Support Group, the annual Heart Children's Day.

The weekly team meeting assesses the delivery of all services to families. Multidisciplinary teamwork is valued, and all members fully participate. The priority of children's needs for each day must be assessed, taking into consideration the impact of their medical care on that day. There is need for flexibility and understanding of the strengths within the health care team, as well as respecting the parents as the constant in the life of the child within the hospital.

Parent bedside accommodation is provided for all parents who wish to stay. Alternative accommodation is provided at the staff residence. A recent development has been Te Kainga Atawhai within the hospital ground. The development of this "house of loving" has added a very special development in the care of all families.

The programme provided in the inpatient units meets all the aims of a therapeutic programme. All children and their parents receive support and preparation in the cardiology unit for cardiac surgery.
Siblings' needs are considered in the daily assessment of priorities in the wards. The needs of these children are often a focus of the weekly support meetings between parents, social worker and charge nurse in the cardiac unit. Hospital play specialists have presented sessions for parents on dealing with the needs of these children. Preparation for the surgery of their brothers and sisters, especially when the child having surgery is a new-born baby, is a priority in service delivery. It must be recognised both in hospital and in the community that the developmental age of some siblings will place them more at risk emotionally than the child having surgery.

The programme by the hospital play specialist in the day stay surgical unit must recognise the special needs of this unit. Children are admitted for insertion of grommets, or minor ear and nose surgery. Children must process in a very short period of time an amazing amount of new information at a time of known stress when they are admitted to day stay units. In Greenlane they move quickly through five different rooms in this unit. They must also achieve separation from their parents. They can often be "frequent" patients, both at outpatients and for surgery.

Research by Quintan and Rutter (1976) and Douglas (1975) shows that children under five years of age who have had more than one admission of more than a week's duration, or repeated hospitalisation, are at risk emotionally and developmentally. Play, second only to the continuing presence of a parent or supportive adults, can minimise the negative effects of stress.

Children who have hearing difficulties are particularly vulnerable without access to play. Verbal instructions, limited attention and developmental delays can add to the stress experienced by these children in hospital. Priority programming is essential for these children. Play is a crucial component in this unit as a means to reduce stress in children prior to the induction of anaesthesia. The play specialist is also the parents' support person during the time of their child's surgery. Children and parents are provided with information, and the opportunity to play through events to achieve mastery in advance of events.

Children and parents wait together in the playroom inside the theatre complex, and adjacent to the theatre. Before children walk through with the nurse to the operating theatre, they seat their parents. They already know that this is where the nurse will come as soon as the child wakes from their special sleep. Parents will support their children in the recovery room as soon as the medical condition is stable and the child has awareness of their surroundings.

Evaluation by nursing staff after the first year of operation of the unit, by a questionnaire to patients, found that parents were overwhelmingly positive of the service. Almost all mentioned the play preparation's benefit to the wellbeing of their children's recovery.

## The Future

Greenlane Hospital staff, and the children and parents who come to hospital, must further develop the partnership of health care that will give children a positive hospital experience.

The coping skills that children utilise are life skills - ones that can help them master other difficulties.

Play programmes, provided by trained hospital play specialists, are essential components of all children's health care in hospital.

P - provides a normal environment in the hospital
L - lessens the impact that children may experience in hospital
A - allows a child to work through strange and new situations and develop coping skills
Y - yields RESULT.

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# Making Sense of it: The role of play in assisting children requiring extensive hospitalization to understand and cope with their illness, its treatment and their hospital experience.

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Walk into any children's ward in New Zealand and it is immediately apparent that the child's surroundings and experiences are very different from that of a child in his or her home. The hospital environment is an alien one, where children's familiar routines are interrupted, and where they are surrounded with strange - and often frightening - people, equipment, sounds and smells. Newly acquired skills and behaviours may be interfered with, and opportunities for play and exploration are severely curtailed or non-existent. Toddlers may be kept in their cots for long periods because their physical safety cannot otherwise be assured. Children are subjected to a number of new experiences, at least some of which are likely to be invasive and painful. They may be separated from the people who are familiar and important to them. Loved and trusted adults may refuse to give them anything to eat or drink and or may permit strangers to perform procedures which the child experiences as distressing. They may even forcibly restrain the child for these procedures. Children may be in isolation, shut in individual rooms without toys or stimulation, or, conversely, they may be overwhelmed with noise and activity. They will overhear numerous conversations, which may or may not be related to them, and will see other children in various states of distress, often without knowing the reason for their distress. They will witness a number of treatment procedures - IV insertion, nasogastric tubes, plaster casts - and may have no way of knowing whether the treatments that they see are planned for them.

There is now ample research to demonstrate that hospitalization has considerable potential to cause long-lasting emotional damage. (Vernon, 1966; Douglas, 1975; Quinton & Rutter, 1976; Golden, 1983; Thompson, 1986) We know that the experience of being in hospital is, of itself, a major stress for children which is additional to the stress of the illness. Children respond to this stress in various ways, according to their age, their personality and emotional state, their previous experience of hospitals and separation; the nature of their illness and treatment; the environment they experience in hospital; and the attitude of those caring for them. (Barker, 1974; Beuf, 1979; Simons, Bradshaw & Silva, 1980; Thompson and Stanford, 1981).
It is not surprising that developmental regression is common, and that emotional withdrawal may be adopted as a way of shutting out experiences with which the child is ill-equipped to cope. (Gibbons, Martha, Blechar, 1985; Thompson & Stanford, 1981, pp.18-22; Thompson, 1986)

We also know what we need to do to assist children to maintain their normal development and their emotional wellbeing while in hospital. We know that we can make changes in the environment and in the way we structure the experience of being in hospital so that it can become a positive experience for the child and for the family. There is no doubt that, for the young child, the most important thing we can do is to make sure that the child has the support of someone important to them (usually a parent or another family member). If a familiar person cannot stay with the child, then the child needs a "substitute" caregiver who can provide continuity as far as possible.

Next to the presence of a parent or familiar adult, most studies have identified access to play activities as the most significant intervention. Play is an integral part of a child's life. It may often be pleasureable, but it is not frivolous. In a strange environment such as hospital, play has a "normalizing" effect. It is the natural medium of experience and conflict resolution for children and can mediate between the child and experiences which might otherwise overwhelm them. In hospital, play becomes a "lifeline" to the familiar world of home, family and familiar activities. Play is something that children know how to do, and know how to do well. We know that the provision of therapeutic play programmes provided by trained staff makes a difference to children's anxiety levels and to their understanding of illness and treatment. (Clatworthy, 1982; Thompson, 1988; Wolfer et al, 1988)

The case studies that follow illustrate the experiences of three children who have participated in the play programme at Auckland Hospital. The aims and and theoretical and conceptual framework of this programme are described in some detail elsewhere. (Matthews, 1991) By a coincidence, all three are boys who have been admitted forsurgical procedures. There is nothing particularly unusual about their circumstances and there is certainly nothing unique about the way in which they have used play to cope with their anxieties associated with their hospitalization and treatment. Current staffing levels mean that only about one third of the children admitted have access to the play programme, and only a very few are able to participate in individual sessions with a hospital Play Specialist to prepare them, through play, for anticipated procedures. We do not have sufficient staff to work with children having surgery on a day-stay basis or children receiving treatment or tests as outpatients, although we endeavour to do so if we receive a referral.

Case Study (Day Stay surgery):

> *Timothy (3 years) required minor surgery as a day stay patient. However, a grandparent had recently died in hospital and his Mum had been to hospital for the birth of a baby sister. During this time, his sister had had an emergency admission and Timothy stayed in hospital with his hospitalized sister, a well sister and his father. His parents reported that Timothy had refused to be examined at outpatients' clinic and was talking about hospitals as places where people died. They said he was so frightened of hospital that they could not persuade him to enter the building. They phoned to ask for help in overcoming Timothy's anxiety before admission.*
>
> *Arrangements were made for Timothy and his family (including his sisters) to come to the hospital playroom (which he could do without walking through the building) "just to play" 3 days before his booked admission. Timothy's parents had read him a book about hospitals, but the storybook child's admission and treatment were very different from Timothy's situation. When Timothy arrived in the playroom he immediately wanted to see the toy castle and soldiers which were in the storybook playroom! He was enthusiastic at the suggestion that he and I make a cardboard castle together. However, Timothy would not participate in medical play or take any part when I played through the anaesthetic procedure on a calico doll. He was happy to try the anaesthetic mask on his father, but would not wear it, or the hats and mask, himself.*

> *While the paint on his castle was drying, Timothy came very happily with me (his parents following) to the ward where he would be, and I pointed out the things that were most like home - the playroom, his bed, the kitchen, bathroom, etc. His parents expressed a wish to be with him while anaesthesia was induced and I suggested they talk to the charge nurse to ensure that this was arranged. We also visited the ward where Timothy's sister had been. Timothy's sister was able to say hi to the nurses who had looked after her and give them a thankyou card she'd made.*
>
> *On the morning of Timothy's admission I met them in the ward playroom. Timothy took me to his bed to show me the castle, leaving his parents in the playroom. We played through the theatre procedure with the hospital Playmobil set. When the little boy figure got to the operating room Timothy turned away from the play and began playing with the toy railway. We made a circle of the track, and a siding which headed towards the hospital. I dressed in the theatre hat and mask and pretended to be the doctor waiting for the little boy to come to hospital. Timothy accepted the suggestion that the little boy might come on the train and he put the small figure in a carriage. However, he took the train round and round the track, not up the siding towards the hospital! We played a game of the doctor listening for the train - hearing it get closer and closer, then hearing it going away. Eventually Timothy was able to bring the train to the hospital. We told the train to wait right outside, ready to take the little boy home again. Timothy was still reluctant to participate in playing through the anaesthetic, but watched again while his father held the doll and I role- played the doctor giving the dolly his special sleep medicine while dolly had his operation, and then waking him up again.*
>
> *Post-op I played briefly again in the playroom with Timothy before he was discharged. He was confident and happy, and his parents reported that all had gone well.*

Timothy's age, and his previous association of hospitals with death, with acute illness, with separation from his mother and with the arrival of a new baby, made him particularly vulnerable to the potential ill effects of hospitalization. For his family, too, their recent experience of hospitals had been of sadness, stress, anxiety and separation. Wisely, his parents recognised his vulnerability. Timothy's anxiety evidenced itself as avoidant behaviour - his inability to involve himself directly in medical play or preparation, and in his initial inability to take the little boy figure to hospital. By enabling him to approach the experience in gradual stages it became a positive one for the whole family. Timothy was able to learn that there were many things in hospital which were much like home - that his family would be with him and that there were fun things to do. Given sufficient time, he was able to regain some control over what would happen, to clarify in what way his surgery would be different from what had happened in hospital in his previous experience, and to familiarise himself with the sequence of events. We were also able to identify that the anaesthesia mask was likely to be very distressing, and so to ensure that his father was with him to support him during induction. His sisters, too, had the opportunity to participate in medical play, to widen their understanding of hospitals, and to learn about and share in Timothy's experience.

**Case Study (Extended stay with post-surgical complications):**

*Tommy (6 years) is developmentally delayed. He had commenced school on his 6th birthday with support from a teacher aide. Only about three weeks after commencing school he required emergency surgery. Complications developed which required his admission to an adult Intensive Care unit, where he stayed for two weeks. Tommy had had no preparation before admission, nor had he had any play activities post-op. English was his second language. When I first made contact he was lying very still, silent and wide-eyed. However, at the mention of "playdough" his hand shot out to grab it, but he made no attempt to use it other than to hold and squeeze.*

*Between play sessions Tommy continued to spend much of his time lying still and silent in bed. By the fourth session, however, he seemed happy to have his bed raised so he could play with dried beans, cars and trucks, and containers for pouring. Concerns had been expressed about his regression, both in play and in behaviour (he was bedwetting, which was not thought to be a result of the surgery). Tommy spoke occasionally, but too quietly for me to pick what he was saying. His play was at the level of a toddler - filling and emptying the various containers, shaking them, and banging them together. His expression was sombre and intent.*

*Other staff were expressing concern that Tommy had been avoiding contact, turning his head away, telling them to go away, and seemed very withdrawn. The nurses said they were having difficulty in persuading him even to sit up in bed other than for very brief periods. The schoolteacher mentioned that he had been very distressed on the previous day when his drip was reinserted.*

*At the next play session I brought an assortment of real and play medical equipment, plus a wistful looking dog puppet ("Pup"). Tommy drew may attention to the IV in his hand. I said I guessed it had hurt, to which he nodded. I introduced the Pup to Tommy's gorilla and suggested that maybe gorilla would like to try out some of the doctor things. Tommy smiled when Pup found it hard to sit still. Gorilla tried on the surgical hat and mask and Tommy again drew attention to his drip. I asked Tommy if maybe Pup would need a drip too. Tommy thought he would, and watched intently as I inserted it. Tommy would not wear the theatre hat, mask or gloves, nor would he help with insertion of the drip, but he did respond to my request for help in choosing which of Pup's hands to use, and in helping with cleaning and taping.*

*Tommy asked what other doctor things I had. He explored the bag, finding the ecg buttons and sticking them on Pup's chest. I said maybe Pup had a sore tummy and would need an operation to fix it, like Tommy, to which he nodded agreement. We then played through the operation. At this point Tommy became very involved and active in the play, directing how Pup would have his anaesthetic (through his IV), showing me correctly with a biro where the opening would be to fix Pup's tummy and covered it with a dressing. I said maybe Pup's operation was all over and it was time to wake him up. Tommy hesitated,* *then asked for another dressing which he placed over the first. He put the mask on Pup and shook him gently - "Wake up Pup, wake up Pup". He removed the mask, leaving the ecg buttons. He then played for a long time with the drip, making it faster and slower. As water soaked into Pup it began to drip out around the bottom of the puppet. Tommy pointed this out and I reassured him that it didn't matter. He laughed at the suggestion that it looked like Pup was wetting the bed.*

*During the doctors' rounds Tommy became quiet and tense, clenching his drip hand very tightly on the bed. When they'd gone, I pretended to talk for Pup and Tommy made Pup move. He took over the speaking for Pup, saying "I don't like the drip, I don't like the drip." I said I guessed Pup hoped it would be taken out soon, and Tommy moved Pup's head up and down for "yes". I suggested that maybe it would be taken out when Pup was drinking and eating well again and getting better. Tommy said it was time for Pup's drip to come out. He held the cotton wool and sticky tape while I removed the drip, and after a little more play he started to take the dressings off. I commented that it seemed like Pup was getting better and was nearly ready to go home. Tommy agreed he was. At this point visitors arrived, Tommy greeted them enthusiastically and suddenly got up, swung his legs over the bed and tried to walk unaided to a nearby chair. Tommy and the visiting child laughed when Pup waved goodbye to gorilla and I took him "home".*

*In every following play session, Tommy repeated the operation and Pup getting better, each time adding a little bit more to the game. Each time Pup got well and went home, and each play session was followed by increased physical activity on Tommy's part.*

*In the ninth play session, Tommy played through the surgery, but left the IV lure in Pup's "arm". At the ward meeting, staff had expressed continuing concern about his reluctance to eat or drink, what they perceived as his lack of concentration, and his unwillingness to do any school work.*

*At the next session Tommy commented that Pup still had his drip. "Pup won't eat", Tommy said solemnly. He had had a blood test that morning and repeated this on a calico doll. Tommy wouldn't draw a face on the doll, so I drew a sad one with tears. Tommy said the "ows" very loudly for the doll.*

*By the eleventh play session, Tommy had become very assertive - requesting specific items of equipment. He again pretended to do a blood test, and insert an IV. When the IV was taken out Tommy said the doll would not need tears any more and asked me to draw a happy face on the reverse side. He again wanted to play operations, but by this time could list all the equipment needed. Tommy put the mask on Pup, and said for him, "Take it off. Take it off." His Mum commented that this is what Tommy had said in the operating room. Tommy drew a face on another calico doll - this doll was Pup's visitor. Again Pup got completely well. This time when Pup had recovered from the operation Tommy asked if Pup could run round and play with his friends. I said I was sure he could, so Tommy made Pup dance and cuddle the visitor doll. Tommy then called out across the room to the school teacher that he was ready to do some schoolwork. This play session absorbed him for an hour and a half and seemed to mark the end of his need to repeatedly play through the surgery.*

Tommy's vulnerability related to the emergency nature of his unexpected admission, with no time for preparation, and the frightening circumstances of the early part of his hospital stay. In addition, his developmental delay and poor language skills increased the likelihood that he would have misconceptions and anxieties that he might have difficulty expressing. Tommy responded to the stress of what was happening by withdrawing, and by reverting to more babyish behaviour. Very withdrawn children, who may seem to be too unwell to play, often respond surprisingly quickly, as did Tommy, to familiar play activities. In working with Tommy, play became a "bridge" to form a relationship of trust with the Hospital Play Specialist. Playing "for" Tommy in the early stages and reflective listening techniques acknowledged to Tommy that his feelings of distress were acceptable and to be expected. Role playing his experience, using toys, enabled him to proceed at his own pace in approaching aspects of his experience which were distressing. Through play he was able to reassure himself that he would indeed get better, resume his friendships and former activities, and - most importantly - go home. (For a comprehensive guide to playing with children in hospital, see Petrillo and Sanger, 1980.)

**Case Study (Congenital problems requiring repeated corrective surgery):**

> *Stephen (4 years) has had two operations on his feet and other operations on his ears. He has spent time in plaster following foot surgery and again following a broken leg. He walks on the sides of his feet and they give him considerable pain. He requires corrective surgery which will involve inserting metal pins and rings into his lower legs and feet. These pins will remain for 3-4 months, and then he will be in plaster for 6-8 weeks.*
>
> *Stephen was referred to the Hospital Play Specialists by his orthopaedic surgeon because of his fear of doctors and hospitals, and his refusal to be examined. His surgeon did not consider that the surgery could proceed until Stephen was emotionally able to cope.*
>
> *At his first visit to the playroom Stephen initially clung to his Mum. He responded to a request to help me find some things to play with and became involved in setting out the train track. From time to time he glanced at various items in the medical play corner, and as he did so I named the pieces of equipment in a matter of fact manner and briefly said why they were used. He didn't approach or ask any questions. His train crashed off the track. I wondered if there were any people on the train - maybe they were hurt and would need to go to hospital. Stephen made a playdough person and put him in the hospital bed. He was then easily encouraged to play with the hospital playmobil, and commenced to explore the medical play equipment. He found the rubber anaesthesia mask and wanted to take it home for his monkey. I suggested he take the plastic one instead, and some operating theatre hats and masks for him and his sister. At first he refused these, but then changed his mind and took a hat and mask. He asked if he could come again to play with the train and the hospital things.*

*At the next visit, two weeks later, Stephen's mum commented that he had played a lot at home with the theatre things. Stephen came down the path to the playroom as quickly as he was able. He became engrossed with water play with syringes and tubing, and with the IV equipment. He asked for the hospital people (the Playmobil Hospital set) and asked a lot of questions about the uses of the various pieces of miniature equipment and furniture, and where they should go in the toy hospital. He made playdough people for the hospital and a playdough monster "to scare the people in the hospital". Suddenly he switched his attention to the sand. He repeatedly buried the toy cars and motorbikes, pretending to "rev up" their engines to get them out.*

*Stephen chose to paint at the start of the next session - one of his paintings was of a blue snake-like monster. When he tired of this I suggested he might like to play with the plaster bandage. He drew a face on the calico doll. His mum asked if dolly had a happy face. I said maybe dolly was a bit worried about getting plaster on his feet. Stephen said very definitely, "No, he's angry". I said maybe he thinks it's just not fair, and Stephen nodded. He plastered both of the doll's feet with several layers of plaster bandage, then immediately tried to remove the plaster by cutting it off with scissors. I reminded him to tell dolly that the plaster had to stay on for a long time while Dolly's feet healed. Stephen took the doll home, still with the plaster.*

*I had the toy medical kit out on the table when Stephen arrived for the fourth session, and also had "Pup" (the sad-eyed dog puppet) on the table dressed in the doctor's hat and stethoscope. Stephen commented on Pup's sad face and I said maybe he was wondering what was going to happen. Stephen took Pup's blood pressure, listened with the stethoscope, and generally played through the routine checks, temperature taking etc. (These were all procedures with which Stephen had refused to comply.) Stephen picked up the anaesthesia mask, holding it to Pup's face first, and then his own. He responded happily to the suggestion that Pup would need some special medicine through the mask while Dr Stephen fixed his feet. Stephen dressed in the theatre hat and mask to do the "operation", insisting on doing it all "by myself". He then asked to repeat it on the doll. He drew a face on the doll, who was again angry. He played through the anaesthesia procedure, then proceeded to give the doll lots of pink medicine. This spilt down the doll's tummy and Stephen commented that it looked like blood. Dolly needed lots of injections, for which I was asked to say increasingly loud "ouches". He wanted to take the miniature "machines" home, but his Mum suggested they could make some together. He also asked for a medical kit and stethoscope. For the remainder of the session he played with two toy ambulances, putting people on stretchers. At one stage he commented that the little person was dead. Near the end of the session he asked if it was time to go. He said he didn't want to go, but nevertheless left quite happily, asking for the ambulances and Pup for next time. This was the first session spent entirely in medical play.*

*I had fingerpaint ready at the start of the fifth session. Stephen was a little reluctant to touch it at first, then became deeply engrossed in making swirly patterns and, later, an angry face. He made a "gooby monster" out of the fingerpaint. We played at guessing what would make the gooby monster go away, then Stephen's fingerpaint-covered hands became the monster and I pretended to be scared. He took the wooden people off the playroom shelf and played that they were stuck in the fingerpaint. All the figures were*

> *dying or dead. He smeared fingerpaint all over them, and then put them in a bowl of warm water. They were all drowning except for the little boy figure. He incorporated a miniature swimming pool in the play - sometimes the figures would float with a toy lifejacket, sometimes they couldn't have the lifejacket and were drowning. He chose various vehicles to come to the rescue of the people. None of these were any good at rescuing. I suggested he could try the ambulances, and he accepted this, using the stretcher to rescue some of the figures. His play had an intense, absorbed quality not seen to the same extent in earlier sessions. When it was time to go he seemed very reluctant to leave, hiding his face sadly in his mum's skirt.*
>
> *A few days following this visit, Stephen had an appointment with his surgeon. He chatted to the doctor, telling him about what he'd been doing in his play sessions, and got off his mum's knee happily to lie on the examination table while the doctor examined him and checked his feet.*
>
> *Next session Stephen told me that he'd been to see his doctor and "I didn't cry". He again played with fingerpaint and with putting little figures in the bowl of water. However, this time he chose "super hero" plastic figures, and all of them could swim. There was no further talk of drowning, or of the need for life jackets.*

Many children, particularly those born with congenital problems, may require a number of hospital admissions and medical treatments each of which, individually, may seem to medical staff at the time to be relatively "minor" and of no particular significance. Without the opportunity to receive developmentally appropriate preparation and support, however, such children commonly become increasingly distressed and fearful about even the simplest procedures. The prospect of further surgery may understandably become very frightening for them.

Stephen's free play represented not only experiences he had actually had, but also showed several symbolic themes expressive of his experiences. Such themes are common in the play of preschoolers in hospital - themes of helplessness, powerlessness, separation, and lack of control or autonomy. (Oremland, 1988; Petrillo and Sanger, 1980) His angry feelings were acknowledged. With assistance from a Hospital Play Specialist he was able to take control over the monsters, and find more optimistic solutions when disasters overtook the people in his games.

In direct medical play, he was given an opportunity to become familiar with some of the procedures and treatments he had experienced. By playing at being the doctor, he was able to become an active, rather than a passive participant and so regain a sense of mastery.

Children have a right to information about their hospital admission and treatment. They need to have this explained to them in sensory terms, in terms of what they will see and feel and hear and taste. They need to know that they are not in hospital because they have been naughty, and they need help to understand that treatment is not a punishment but is to help them get better. They need to know which part of their body will be involved in any procedures or surgery, and that the rest of their body will not be touched. They need to know that nurses and doctors understand that they might be feeling scared, or anxious, or angry and that lots of other children (and grownups) feel like this too. They need to know that it is okay to cry. They need to know that they will go home again.

Young children do not, however, need a lot of detailed information about their illness. Children's understanding of illness is primarily determined by cognitive maturation. Logical concepts, such as cause of illness, necessity of treatment and the role of medical personnel are often beyond the developmental ability of the young child. Understanding becomes more complex as the child's cognitive processes mature and, therefore, for the chronically ill child, explanations must be repeated at various developmental levels as the child matures. (Brewster, 1982; Feldman & Varni, 1985). For the young child, such explanations can only be presented through play.

The event of hospitalization seriously threatens the quality of play and the extent to which the child may engage in it. To discourage or prevent play is to impede normal development. Hospitalization and illness are stressful enough for children; we should not be doing further harm by our failure to provide for their ongoing developmental and emotional needs. There is no doubt that children in hospital, if provided with the facilities to play and sufficient support from a skilled adult, will use play to maintain normal development, to increase understanding, and as a vehicle for self-expression and retention of a sense of mastery and control.

The question must be asked as to what emotional legacy is left for the hundreds of New Zealand children who have experiences similar to those of Timothy, Tommy and Stephen but who do not have an opportunity to work through these experiences in play?

Hospitals cannot claim to provide quality paediatric healthcare (or even adequate care) unless they are providing appropriate play programmes to which all children have access. No hospital programme can be effective without appropriately trained adults skilled in assisting the child to express fears and obtain resolution of these, in using play as a tool for enhanced communication, and in preparing children through play for medical procedures. For children to derive optimum benefit from hospital play programmes, all staff caring for children need an understanding of children's developmental needs and, in particular, the role of play as a therapeutic medium. (Thompson and Stanford, 1981)

Sadly, the provision of play programmes in New Zealand hospitals has not been seen as a priority in paediatric care. The situation has changed little since Robin McKinlay's address to the Third Early New Zealand Early Childhood Conference in 1983. (McKinlay, 1983) At that stage she recommended "tact and caution" in the introduction of changes. Nearly ten years later, the time is overdue to throw caution to the winds (though perhaps not tact!). We know what is needed. We know how to implement appropriate programmes. It's time we did so.

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# A THERAPEUTIC PLAY PROGRAMME FOR YOUNG HOSPITALISED CHILDREN

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## Introduction

The importance of play in the healthy development of children is well recognised. Hospitalisation is a time of stress for young children disorganising, interrupting and inhibiting the child's ability to play, (Burstein and Meichenbraum, 1979, Tisca, Hurwitz and Angoff, 1970 cited in Thompson, 1986) depriving the child of one of their most important coping mechanisms. A therapeutic hospital play programme aims to provide an environment that enables the child to engage their ability to play to help them cope with the stress of being in hospital1. The aims of a Therapeutic Play Programme are outlined. The way that these aims are translated into play activities will be considered and supported by examples. In conclusion the theoretical framework on which the programme is based will be summarised.

Therapeutic Play Programmes (TPP) are a relatively new aspect of child health care and special education in New Zealand. A 1979 study by Robin McKinlay showed that provision of hospital play programmes lagged behind that of other countries and did not reflect the growing recognition overseas of the value of supervised play in hospitals. A later study by the Health and Education Departments (1987) showed little improvement. McKinlay's study of New Zealand hospitals (1983) identified three different models of play - three different ways that play is viewed within hospitals. Play, in the first model, is viewed merely as a distraction from the hospital experience. The aim of such a programme is to keep children happy. The Hospital Play Specialist's (HPS) role is largely that of "mother" substitute. The second model, the educational model, assumes that play is an essential tool for children's development without which hospitalised children are deprived of necessary conditions for normal life. Staff have professional training but they are outside the team of healthcare givers. The third model, the therapeutic model, encompasses both the other two models but adds the further dimension of play as psychotherapy. In this model play mediates between the child and their hospital experience aiming to transform the potentially psychologically harmful experience to a challenging experience through which the child can learn and grow. The HPS is included as part of the healthcare team caring for the child. The TPP is therefore a preventive mental health programme and differs therefore from Play Therapy which is intervention for children who have some identified pathology.

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1 "In Hospital" is defined as inpatients,day-stay patients, children seen but not admitted, outpatients and siblings.

Research indicates that children, of their own accord, may use play to help cope with the stresses accompanying health care (Gilmore, 1966, cited in Gaynard, Wolfer, Goldberger, Thompson, Redburn and Liadley, 1990). Few studies however have examined the effectiveness of play interventions in hospital. Those that do provide encouraging results. In 1970 Lockwood (cited in Gaynard et al, 1990) found that children engaged in a single medical play session on admission had significantly lower anxiety-defence scores after the session. A study by Clatworthy (1981) of 114 5 to 12 years old children admitted to a paediatric hospital over a four year period showed that anxiety levels of children who did not receive therapeutic play increased during their hospitalisation, whereas there was no significant increase in the measured anxiety levels of those children who did receive daily 30 minute sessions of therapeutic play. Using a similar design Peterson and Shigetomi (1981, cited in Gaynard et al 1990) observed the affect and interaction of 2 - 17 year olds during a 20 minute play intervention. Increase in both positive affect and interaction were observed. However the changes observed returned to baseline in the post intervention period suggesting that it was the presence of the HPS that facilitated the play and changes in affect. Finaly, Schartz, Albino and Tedesco (1983, cited in Thompson 1986) found that nondirective play in the presence of an adult may be helpful in modifying children's upset during hospitalisation, even when the play is unrelated to hospital experience.

## Aims of a Therapeutic Play Programme

The aims of a TPP (Matthews, 1987) are:-

1) to meet the ongoing developmental needs of individual children.
2) to assist children in coping with the unfamiliarity of the hospital environment.
3) to increase children's understanding of their hospitalisation and treatment
4) to promote a sense of control, mastery, and positive self concept; to allow children to make some impact on their environment.
5) to facilitate children's self expression: sharing of feelings, concerns and their understanding of illness, treatment and the role of hospital staff.
6) to meet the child's need to cope with separation and deprivation (and/or over stimulation).

These aims are not listed in order of priority. The importance of each of these aims will depend on the needs of the individual child in terms of their age, personality, level of family support, extent to which the child is emotionally secure, level of understanding and coping mechanism, previous experience of hospital and illness, the severity of the illness and the nature of the treatment required and the degree to which anxiety about the child's condition is communicated to the child. In implementing these aims the cultural background of the child must be considered.

**Meeting the ongoing developmental needs of the child.**

A play programme that meets the ongoing developmental needs of the child in hospital resembles any early childhood programme with some subtle differences. The play of hospitalised children is inhibited because of the child's ill health and the hospital environment. To stimulate play hospitalised children need to have an adult to facilitate play, toys to play with and an environment in which the child feels safe to play. A safe playroom in this sense is one where no treatment will be carried out. Children in hospital regress causing feelings of confusion and become frustrated because they are unable to complete tasks that normally they can achieve. Strong emphasis is therefore placed on activities such as play dough, art activities and water play; activities where the child can vary their level of functioning. The experience of being hospitalised bombards children with unfamiliar experiences and new stimuli much of which the child is attempting to assimilate. A TPP therefore does not include planned teaching sessions on for instance colours or mathematical sets. Learning and maintenance of these of these skills can be achieved through incidental learning (eg "You have made a pig with the yellow cutter").

**Assisting Children to Cope With the Unfamiliar Hospital Environment.**

To assist children to cope with the unfamiliarity of the hospital environment the HPS may encourage the child to explore the immediate environment while riding a bike. Playing a board game about hospitals encourages children to discriminate between different aspects of the hospital experience rather than seeing and dealing with it as an entire experience. When landing on the square they have called "Nil Per Mouth" results in their counter again going back to the beginning of the game children often reassess just how bad not being able to eat was, for instance, in comparison with having an IV inserted. Reading books about hospital, playing hospital games and exploration of the environment stimulate discussion about the things children have seen and heard.

> *"That baby is crying because the doctor wants to hurt her."*

or

> "*That boy* (in traction) *is being tied down.*"

Medical play helps children of all ages, 12 months through to and including adolescence, to become familiar with unknown aspects of their care and to learn new coping strategies. Medical play is defined by McCue (1988) as a form of play that always has as part of its content medical themes and/or the use of medical equipment. Medical play like any other play is freely chosen by the child. However it does differ from other dramatic play in that it may not always appear to be enjoyable. Children involved in medical play may become intense and aggressive. The role of adults may be passive with the play being child directed or the adult may become actively involved participating in the play perhaps suggesting an alternative scenario.

> *"Dolly has to wriggle and wriggle when she has a needle.... You and I could teach dolly something different to do when she has her needle."*

McCue (1988) identifies four different types of medical play; role reversal/role rehearsal medical play, medical fantasy play, indirect medical play and medical art. The most traditional type of medical play is role reversal/role rehearsal play which allows children to take on the roles of health care professional re-enacting the procedures that they have experienced on models such as their hospital doll. The child becomes actively involved, manipulating and exploring the medical equipment clarifying the purpose of the equipment

> "*the thermometer is to measure how warm you are dolly*".

Children with the most understanding of medical equipment have been shown to be the least anxious about medically related situations (Siaw, Stephens, Holmes, 1986). Medical fantasy play does not include specific medical equipment. Rather it involves play of themes associated indirectly with hospitalisation. HPS may be locked in jail, the crashed cars may get badly hurt. Children engaging in this form of play may progress to using medical equipment in role reversal play as they become less anxious. Indirect medical play includes play using medical equipment for other purposes (such as using syringes for dough and water play) and play using puzzles and games about hospitals or related themes (such as food, separation or home role themes). Indirect medical play can be useful for the very fearful, noncommunicative child and the very sick child. Medical art includes any artwork (painting, collage, box construction etc) and gives the children the opportunity to express their understanding of and psychosocial reaction to their medical experiences. Art requires little physical energy which enhances its usefulness as a therapeutic communication with hospitalised children (Clatworthy, 1981).

> *Debbie aged ten was having some difficulty coping with the permanence of her diabetes. She drew diabetes surrounded by two hands. The hands represented death and dying and were to squish the diabetes. Debbie knew that the only way to get rid of the diabetes was for her to die. She didn't want to die and she didn't want to live with diabetes.*

Medical play is freely available in the playroom with a hospital corner set up alongside the family play area. Medical play is also offered to children in their bedrooms. Care must be made by the HPS to provide a balance between medical play and other age appropriate play activities.

Children can be encouraged to learn more mature coping strategies using medical play in conjunction with other techniques. A play programme was devised for five year old, Betty, who needed five people to hold her down for her weekly blood tests, to help her overcome her fear of the needles.

> *The HPS wrote a story about a little girl, Jenny, of the same age who was very scared of dogs. The story told of Jenny's successful efforts to make her fears smaller and smaller and to take control of her fears. Betty illustrated the book. The activities in the book that helped Jenny overcome her fears were discussed and suitable activities offered to Betty. Betty made a collage picture using syringes and cotton wool* (medical art), *mixed colours using syringes* (indirect medical play) *and was engaged in needle play with her hospital doll* (role reversal medical play). *Betty was encouraged to draw her fears and then draw those fears smaller and smaller. She was then taught visualisation as a coping technique to help her lie still while the blood test was carried out.*

At the completion of the programme Betty was able to hold out her arm for her blood tests. The first week she needed somebody to hold her arm to help keep it still but after that she was able to do it by herself. The pride and feelings of mastery this child experienced were very apparent.

**Increasing children's understanding of their hospitalisation and treatment.**

Medical play is also an important technique for increasing children's understanding of the reason for their hospitalisation and treatment. Observing a child at medical play gives insight to the child's understanding. A three year old described leukaemia *"as teddy having jelly beans up his nose"* (he had been looking at the pictures of blood cells), the four year old described diabetes *"as a spider in the tummy of her hospital doll"*. In the absence of an age appropriate explanation children draw on their previous knowledge to create an explanation for their hospitalisation, illness and treatment. Often the explanation they create is more scary than the real one.

> *Kate, a very active eight year old, knew that the type of leukaemia she had was the more severe of the two types. "This doll," she said, "has the hyperactive leukaemia; this one doesn't. The doll without the hyperactive leukaemia is going to be made better by the doctors. The one with the hyperactive leukaemia is waiting for the doctors to decide when she will die.*

Using repeated sessions of medical play children show evidence of more mature cognitive processing. Three year old Susan used small world play to clarify her understanding of the role of hospital staff after her admission to hospital with severe asthma.

> *Initially the nurse doll was the angry person chasing the children frightening them. The mummy and daddy were lost. After several sessions the angry nurse became the naughty nurse helping the children to find their parents.*

Susan was then able to move from a three year old's concept of the role of health professionals (that people that hurt you do it because you are naughty and they are angry with you) to a more mature concept. She now was beginning to understand that things or people that hurt you can also help you.

Special play preparation programmes have been developed to help children to understand anticipated procedure such as blood tests, temperature taking, surgical procedures (from grommets to amputations) and treatments (eg radiotherapy). Parents, and where possible, siblings are involved in the preparation. Information given must be accurate and be at the level appropriate to the child's psycho-social development, emphasising the sensations and feelings the child will feel (the prick will hurt, the wipe is cold and stinky, the anaesthetic makes you feel twirly and dizzy in the head). Individual hospital rag dolls are given to all children and are used as models for preparation sessions. A medical play session precedes the preparation giving the HPS an indication of the child's understanding of and feelings about the anticipated procedure. The HPS then plays through the procedure actively involving the child. The "game" is repeated adding more information each time as appropriate to the child's age. Throughout the game  resistance or avoidance by the child (or the doll) can be used to generate active listening statements ("Dolly feels very scared") or feeling of control in the child ("Dolly says go away, go away!!"). Appropriate coping strategies can be explored.  Preparation programmes for older children increasingly rely on discussion, body outlines and visual aids such as the Zaadi dolls. Preparation is an integrated part of an child's individual programme. The effectiveness of such programmes is probably best illustrated by the response of children being prepared for radiotherapy. With the play programme children having radiotherapy for treatment of leukaemia and aged three years and over are able to lie in the room on their own with their head held still by a plastic face mask clamped to the table.

After the procedure/treatment children are encouraged to have play through the procedure again. Postprocedural medical play sessions are particularly valuable for children who were not able to be prepared for the procedure.

> *Six year old Tamati, following his emergency surgery, spent nine consecutive sessions playing through what had happened. Initially he directed the HPS's play but with each subsequent session Tamati became increasingly involved adding a little more of his understanding to his hospital game.*

**Promoting  sense of control, mastery and positive self-concept and allowing children to make some impact on their environment.**

A sense of mastery and control are associated with a positive hospital experience (Beuf, 1979). A TPP therefore encourages games involving self awareness such as "peek-a-boo" and "round and round the tennis court", dressing up or face painting. Older children write messages about themselves and their family or makes rules such as "No boys allowed in this room". Materials that allow the child the greatest choice and the least opportunity for error (sand, water, playdough) and activities that maximize the opportunity for creative and constructive play (painting, blocks) are important in the hospital environment in which children are required to give up so much of their control. The escaping into the world of their imagination helps children cope with the experience of being in hospital.

> *To help cope with her blood tests Betty imagined she was riding a brand new pink bike around her neighbourhood.*

**Facilitating Children's Self Expression: Sharing of Feelings, Concerns and their Understanding of Illness, Treatment and the Role of Hospital Staff**

Children who can express their concerns and fears are more likely to feel the sense of mastery and control that enable effective information processing and the lowering of uncertainty about hospital procedures and treatment. Much of the emphasis of a TPP is therefore on encouraging children's self expression. Small world play is often stimulated with a sand tray and small figures and animals or with the hospital playmobile sets.

> *Four year Jason came to the hospital crying "Don't kill me, don't kill me". Recently his Grandfather had died in hospital. Initially in his play everybody in the ambulance died in hospital. Gradually less and less people died until finally he was able to share with the HPS how he missed his grandfather and how angry he was that he had left him.*

Puppets are chosen by some children to share their concerns.

> *Four year old Max had been unable to eat without choking. Sometimes he even stopped breathing. After his surgery Max used a frog puppet to work though his fears about eating and dying, directing the HPS to make the puppet choke on the play dough. He would resuscitate the frog and then feed him some more playdough.*

Many children chose to use art as a way of expressing their feelings.

> *Five year old Leslie was dying of leukaemia but as yet the family had been unable to discuss it with the children. In the playroom his seven year old brother drew a picture of himself helping Leslie up the steep hill. He then drew himself walking down the other side alone.*

**Meet the Child's Need to Cope with Separation and Deprivation (and/or over Stimulation).**

TPPs must recognition the central and constant role of families in the development of children. Parents are part of the programme; they are encouraged to play with their child, to bring things from home and to share their concerns about their child. HPS have a depth of understanding in child development enables them to explain to the family their child's reaction to hospitalisation both during the hospital stay and after discharge. HPS provide activities to keep children in touch with their home (telephones, playdough, family play, dolls houses). Siblings are actively encouraged to participate in the programme. Research suggests psychological upset in many of the siblings of children with chronic illness (Siemon, 1986; Menke, 1987; Ferari, 1987; Carr-Gregg and White, 1987).

> *Five year old Lisa was in the family play corner waiting while her brother had his treatment. She looked sad and anxious. The HPS said "I wonder why Mummy and Daddy are taking so long ". "Because they love Luke the most," said Lisa.*

The experience of being hospitalised inhibits the child's ability to play. Their treatment and illness often restricts their mobility. Parents often misinterpret their withdrawal for the lack of desire to play. Stimulus deprivation can be a reality for the young patient. Equally the young child can be overstimulated by the hospital experience. Young children will meet more than 100 new people on their first day of admission to hospital (Grant, 1983). Play is important because it is something familiar in this strange environment, it helps maintain the relationships with the family and it is a way to begin relating to hospital staff that are caring for the child.

## Theoretical and Conceptual Framework of a Therapeutic Hospital Play Programme

From this discussion of the aims of TPPs and their application it is possible to discuss the conceptual framework on which TPP are based. The programme is based on the premise that TPP can reduce the stress experienced by hospitalised children and their families and enhance their abilities to cope effectively and gain from potentially stressful situations. The conceptual framework for the TPP developed at Auckland Children's Hospital is based on theoretical and research literature related to child development, stress information processing and supportive relationships.

Developmental theory provides the underlying conceptual framework in the writing of the aims and their implementation. Theory and research show that the child's developmental stage affects their response to hospitalization and hospitalisation can effect the child's development. The programme relies heavily on Piaget's theory of cognitive development and Erikson's theory of personality development.

The second major premise is that it is desirable for children experiencing anxiety to cope with these feelings (coping model) rather than displaying fearlessness, withdrawal and other avoidant behaviour. Psychological stress has two aspects; the event or stimulus that causes the stress and the individuals response to the stress. The programme aims help with the response aspect of stress by listening to and working to correct misconception, by actively teaching coping strategies and giving the opportunity to increase a child's understanding of their treatment and illness. The event can often be made less stressful to the child by increasing the understanding of staff of the psycho-social needs of the child and encouraging changes in the environment and case management that reflect those needs. Children who have repeated experiences of ineffective coping may develop the maladaptive syndrome of "learned helplessness" (Seligman, 1975). Effective coping can be linked with the concepts of "mastery" (Freud, 1966) or "effectance" (Bandura, 1977). Children who experience a sense of mastery and competence in hospital theoretically will be able to generalise these feelings of competence to future stressful events. Rotter's concept of locus of control (1954) is helpful in assessing a child's belief in her competence in coping with the stress of hospitalisation.

The third major premise is that children can process information when in a stressful situation and that play has a crucial role in the processing of this information. Play allows children to process information at their own pace, to create and play through, repeatedly, situations that may be of particular concern. Observation of children at play allows for the monitoring of children's understanding, any misconceptions held and areas that the child may be avoiding.

Underlying and essential to the effectiveness of the above is the role of a supportive relationship between the HPS and the child and family. A supportive relationship is characterized by advocacy, mutual trust and open two way communication, a focus on coping and competence, a developmental perspective and a family centred approach.

The components of the conceptual framework are interactive. The processing of information depends on the child feeling competent and masterful; feelings of competence can result from successfully coping with the stress of hospitalisation. Coping strategies depend on having some knowledge and understanding of what is happening. Play and the supportive relationship with the HPS are the key and underlying features of this individualized, interactive approach to the provision of a therapeutic play programme for hospitalised children.

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# MEDICAL PLAY IN AN EARLY CHILDHOOD CENTRE

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Medical play is defined as the child's use of their ability to play through their experience of illness and/or medical intervention in order to increase their understanding, to express feelings and misconceptions and to develop more mature coping mechanisms. Medical play is a form of play that always has as part of its content medical themes and/or the use of medical equipment (McCue, 1988).

The most traditional form of medical play is dramatic or role rehearsal/ role reversal medical play. In this play children take on the roles of health care professionals and re-enact medical events on dolls, puppets, their playmates, teacher or family. The play may be realistic or full of fantasy. Children play through events they have experienced and that preoccupy them. This type of play may be offered to children before a visit to hospital, the doctor or the dentist. There is some evidence that children who play with hospital related toys before medical intervention are less anxious and distressed after the treatment than children who avoid such toys (Burstein & Meichen-baum, 1979, cited in McCue, 1988).

It is important not to confuse medical play with play preparation. Play preparation prepares a child for a specific treatment, examination or surgery. When an adult attempts to prepare a child psychologically for a medical event by playing through the event for the child and/or familiarizing a child with medical equipment, learning may occur but not necessarily play. Play preparation uses the child's ability and interest in play and imposes on the child an adult's agenda. Preparation of a child for an anticipated medical event should not be undertaken lightly. Considerable knowledge of the cognitive and emotional processes involved and the details of the medical event are essential.

Children do not necessarily need medical equipment to become involved in medical play. Any equipment used for fantasy and dramatic play will be used to support playing through a medical theme. Blocks, dolls houses, cars trucks, plastic animals may be given roles in a medical play scenario. A piece of jig saw maybe the medicine bottle, the block an ambulance, the plastic animals may be the patients. This is called medical fantasy play. A third type of medical play, indirect medical play, does not involve role play or fantasy but includes use of equipment such as jigsaws depicting interaction with a nurse or doctor. A child who has an IV during a reccent hospitalisation may spend a lot of time playing with tubes in the water play trough. Medical art is the fourth type of play activity. Painting, drawing, collage or three dimensional creations give children the opportunity to express their feelings and/or understanding of their medical experiences.

As with any other form of play, medical play must be freely chosen by the child and reflect the child's needs and pace. Unlike other sorts of play however, children may not enjoy medical play. They may become angry, upset or aggressive. To meet the child's needs medical play equipment offered must reflect the child's previous experience. Such an experience is most likely to have been a trip to the family doctor or health care in the home eg temperature taking, having medications, applying band-aids. To encourage such play Early Childhood Centres need a medical kit such as the Fisher Price Medical Kit, band-aids, cotton wool, bandages and a realistic stethoscope. The provision of the less realistic Fisher Price Medical Kit is important. For some children medical intervention will have been a distressing event. To be able to approach the experience through play these children may need to begin with indirect medical play or fantasy medical play, progressing to role reversal medical play initially with play equipment that is less realistic. The provision of medical play equipment in the family play corner and books on going to the doctor or a visit to the hospital is an important indicator to children that this experience is something that it is OK to "talk" about.

Parents and Early Childhood Workers recognise that medical intervention is a significant experience in the life of a young child. Many therefore feel a need to support and protect the child by becoming involved in promoting medical play and in actively teaching well children about a possible hospital experience. They may consider it important to teach children about what it would be like to have a broken arm or an operation just in case the child should have this experience. One of the most important aspects of preparation is that information be accurate. It is not possible for Early Childhood Workers to be accurate about an unanticipated and unplanned experience. The preparation of children for the medical intervention they may never experience also raises issues about what the child is learning, and the role of the adult in medical play in an Early Childhood setting.

To actively organise a medical play session rather than follow up issues raised by the children ignores the unique interpretation of young children. No two preschoolers will have the same understanding of the experience of visiting the doctor. Further more the opportunity for children to express their concerns and any misconceptions may be lost. Any information that is given to children will be assimilated into previous misconceptions. To actively organise a medical play session rather than support child initiated play also raises the issue of control. Control is of crucial importance to the child in a medical setting. The loss of control is associated with stress, preventing self-expression and learning. It is important therefore that medical play return to the child the feeling of being in control and a sense of mastery. The initiation of medical play by adults removes the control from the child. The more control the adult assumes in medical play the more likely it is that the child will be forced to confront anxiety arousing issues without resolution.

The role of the adult in medical play is very important and can be seen as:-

1) Providing an environment that facilitates the child's involvement in medical play by reflecting the children's experience. Those children who have more extensive experience will improvise - a straw may be used as a syringe.

2) Providing a level of supervision while children are involved in medical play that acknowledges that young children's cognitive immaturity and limited coping skills make them vulnerable to misconceptions, fears and to being overwhelmed by medical intervention.

3) Observing the children engaged in medical play so that their level of understanding and any fears and misconceptions can be assessed. Having heard a child express a misconception or fear the adult role is to challenge the misconception and to help the children attain resolution to their fears. "Dolly is maybe worried the doctor took all her blood. I wonder if dolly knows that all her fingers have blood in." Older children may welcome the information that their bodies make new blood. Young children are preoccupied by events that are not understood or that challenge previously acquired information. In responding to this need, adults can support the child to gradually develop a more mature understanding of their body.

4) Accepting and acknowledging the child's feeling about the medical intervention. It is very tempting to say to the child "Isn't dolly good having her medicine". This infers that any child who does not like their medicine is naughty. It is more appropriate to ask the child if dolly thinks the medicine is nice or yukky. If it is yukky it would seem realistic that the doll would resist having medicine. Having control over giving the doll medicine will often mean the child has less need to take control when they are required to take medication. To insist that teddy does not cry while having an injection is to inform the child that expression of feeling is not part of health care. A common adult fear is that by discussing such feelings they will impose on the child or create a fear in the child that was not there. This is not the experience of those working with children in hospital. Children are comfortable correcting adults when they are wrong. "Dolly is not scared. He will miss Play School."

5) Having a knowledge of children's understanding of illness and treatment and how that changes with maturity. Preschool children think they are unwell because they are naughty or because their parents don't love them. They have no understanding of the inside of their bodies. They deal with what they can see, feel and hear. Thus explanations as to the cause of infection will be beyond most preschoolers comprehension. Discussion about their feelings and the sensations they experience is the beginning of an increased understanding of illness, wellness and health care.

6) Being available to redirect children's play if it becomes aggressive. A child who has had a recent hospitalisation may have strong feelings which could be directed towards other children or adults in her play. It may be necessary to give redirect her play and give a doll to play with. Injecting a doll for instance may help the child to express her feelings and ultimately resolve them. Resolution is most likely to be attained when the child's distress can be acknowledged and accepted. ("I guess Dolly is very angry she had to have that needle.")

7) Having skills that encourage children's self expression eg open ended questions, active listening skills.

If a child has had an unplanned admission to hospital they will use medical play equipment in their centre to play through the experience, a sort of debriefing. The role of the Early Childhood Worker is the same as above but the sessions will probably be more intense. If the child continues to play hospitals intensely for more than 4 - 6 weeks it would be advisable for the parents or the Early Childhood worker to ring the Hospital Play Specialist.

In summary the major point that this paper attempts to make is that medical play is a type of play that should be available to children who need or desire it. However because medical play relates to the potentially psychologically stressful experience of medical intervention the adult facilitating medical play has some special responsibilities. The writer's view is that unstructured medical play is most beneficial to children in an Early Childhood setting.

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# PREPARATION OF THE YOUNG CHILD FOR HOSPITALISATION AND THE ROLE OF THE EARLY CHILDHOOD TEACHER

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The benefits of preparation for hospitalisation procedures are undisputed and well supported by research. Preparation can help the child cope with stress by providing information about the hospital environment and/or procedures, by demonstrating a "coping" role model, by allowing the child to rehearse potentially stressful behaviours. It introducing the child to the people who will be looking after them and carrying out the procedure. The benefits of preparation mean that the child will be more co-operative and more willing to return to hospital. It enables the child to develop and engage age appropriate coping mechanisms. Psychological preparation acknowledges the child's right to information. Not telling the child about an anticipated hospital experience can affect the trust between the parent and child - trust that is essential for ongoing development. In the absence of an explanation children will create their own understanding. This explanation is usually far more scary than the reality.

If the psychological preparation of the child and family for hospitalisation is to be effective the process must involve people from a number of disciplines from the time the admission is first discussed, throughout the hospital visit and for a period of time after the medical intervention. The role of the Early Childhood teacher is in supporting both the child and family before and after the hospital visit.

Parents have an important role in the preparation of their child for hospitalisation. Parents are trusted by the child, sensitive to the child's mood and understand the child's way of communicating and of coping with stress. However most parents lack sufficient knowledge about the procedure or the setting to adequately prepare a child. Even those that do have the knowledge feel uncomfortable about broaching the subject. Parents often worry that telling their child about their surgery or examination will increase there anxiety. It is true that an understanding may increase anxiety. However parents may fail to distinguish between the appropriate anxiety of a child who understands what will happen and the inappropriate lack of anxiety that results from little understanding or from avoidance or denial.

If a child in your centre is having a planned admission to hospital Early Childhood Workers have an important role in supporting the family so that the experience of being in hospital can be a learning growing experience. It is very important that parents have a good understanding of what is going to happen to their child. Many families need encouragement to talk about their feelings and fears and their understanding of what will happen. They will need encouragement and support to ask healthcare givers the questions necessary to gain the information they need. Families need information on how best they can prepare their child for the experience and how their child may react to being hospitalised. The strongest need of the hospitalised pre-schooler is the presence of a consistent caregiver. This can take some organising and it requires considerable family community support. Some families may benefit from Early Childhood teachers encouraging them to think about the sorts of support they may need and how best to go about getting that support. Well siblings will be affected by the experience of having a brother or sister hospitalised. For them, support in their own environment, maintaining a familiar routine and regular contact with the sick sibling are ideal.

The question of when is the optimum time to prepare a child has never clearly been answered. The general rule applied is that if the period of preparation begins too long before surgery the child will believe that it is never going to happen or will elaborate the information they have been given with their own fantasies. On the other hand if the preparation comes too late the child does not have time to assimilate the information to a depth that helps them cope. The timing of the preparation will depend on the age and maturity of the child - two or three days before hand for the child under three, one or two weeks before hand for older children. Increasingly hospitals admitting children are offering preadmission programme for families. The most appropriate time for a hospital preadmission tour is during the week before hospitalisation. Major preparation sessions in which greater detail is given about the surgery or procedure is generally deferred until the child is admitted to hospital and is given by a Hospital Play Specialist or nurse. Most appropriately this occurs the afternoon before the event.

If a child from your centre is having a planned admission to hospital or out patient appointment it is important that all the children in the centre are "told" that Sam:-

- is going to hospital
- he is going to hospital to have something wrong put right (eg his sore tummy fixed)
- or he is going for special tests so that the doctor can understand why he is unwell
- his mother and/or father will go with him
- and he will come back home again and back to pre-school when he is well.

This information can be presented using dolls as models. Further discussion can be stimulated using story books about hospital. Detailed preparation is best given by a hospital play specialist or nurse once the child is admitted, ideally the afternoon before the procedure.

Any discussion about hospitalisation must reflect the child's view of the experience. Children view hospitalisation through very different eyes. All children will be anxious about being separated from their parents and the familiar routines of home. They fear the unfamiliar and the unknown. Other fears will depend on the age and developmental level of the child. The egocentric thinking of pre-schoolers means they will see hospitalisation and treatment as loss of parental love and punishment for some wrong doing. They will worry about bodily injury and loss of autonomy and control. Are they still themselves? Are these tubes now a permanent part of them? Young children deal with what they can see. They cannot see the leg in the plaster cast, therefore it does not exist. Magical thinking results in misconceptions - it is the nebuliser mask that causes the asthma. In the school age child fears of pain and injury are compounded by fears of death and mutilation. Although by this age the children are increasingly able to think logically they are often unable to separate the body part from its function eg a tonsillectomy will mean that you can't talk. They are unable to distinguish between words that sound the same eg wheeze and wees, souls and soles, stretcher and stretch her.

Any information given the child must be accurate and age appropriate with emphasis placed on the sensations that the child is likely to experience. Children under six have no understanding of the insides of their bodies and will be only interested in what they will see, feel, hear, smell and who will be with them. Families may find the suggestion of making a "Hospital Book" for their child useful. A "Hospital Book" can include photo of home and then using a combination of text and words to outline the procedure the child will be experiencing. Books made either for children or with them about their own hospital experience helpful both before and after the hospital visit.

After an admission to hospital the child will want to play through the experience as a way of expressing feelings and to further understanding. Adult support is particularly important during this period. If the child continues to play hospitals intensely for more than 4 to 6 weeks it would be advisable for parents or the teacher to contact the Hospital Play Specialist or Charge Nurses.

There is considerable interest in preparing well children for the possibility of a hospital admission by organising a visit for a group of children to the local hospital. It is the view of the writer that such visits are inappropriate. One of the most important aspects of preparation is that information be accurate. It is not possible to give accurate information about a unanticipated experience. A trip to a hospital may reinforce misconceptions about hospitalisation or create misconceptions. It may heighten anxiety from previous medical intervention without the opportunity for expressing feeling. It seems more appropriate to respond to experiences that children attending the centre have of hospitals and health care by facilitating medical play for those children that need or want to be involved.

In summary this paper presents the view that the role of an Early Childhood teacher in helping prepare a child for a planned hospital admissions an important one. The teacher is one of a number of professional who will be involved in supporting a family through this stressful time. The teacher's relationship with the family means she is in a position to discuss with the family their feelings about and understanding of the procedure and encourage the family to seek appropriate support from the community and health care providers. Her relationship with the child and her knowledge of child development means the teacher has a role in discussing with the family the importance of preparation for young children. She can support the family by helping with the initial preparation of the child and/or siblings. The admission to hospital of a child in the centre provides the teacher with the opportunity to facilitate medical play and discussion about hospitalisation for those children who want to become involved.

# NATIONAL CURRICULUM GUIDELINES FOR EARLY CHILDHOOD IN AOTEAROA / NEW ZEALAND:

## A PHILOSOPHICAL FRAMEWORK FOR DEVELOPMENT

Paper and workshop presented at the Early Childhood Convention, Dunedin, 1991

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The Ministry of Education has contracted us to develop National Curriculum Guidelines for Early Childhood Education that detail the requirements for an appropriate curriculum as set out in the *Early Childhood Centre Regulations 1990* and *Statement of Desirable Objectives and Early Childhood Education Charter Guidelines 1990*. This is the first stage of a longer term early childhood curriculum initiatives by the Ministry which will move on to the development of curriculum resources and staff development programmes. Similar curriculum initiatives are being developed in Australia, Britain and the USA. We have formed a Curriculum Development Team who represent a wide range of early childhood services and specialist groups within early childhood. Our intention is to develop appropriate guidelines for infants, toddlers and preschoolers as well as incorporating distinctive perspectives in relation to Maori, Pacific Island, Special Needs and Home Based Programmes. There are three sections to this paper:

The national and international context
An early childhood approach to curriculum development
A framework for development of curriculum guidelines

# THE NATIONAL AND INTERNATIONAL CONTEXT: TWO MODELS OF EARLY CHILDHOOD CURRICULUM

The Early Childhood Education Charter Guidelines of 1990 sets out a statement on the curriculum:

> The early childhood curriculum shall be defined as the sum total of the children's direct and indirect learning experiences in early childhood services. Opportunities for learning through play and activities which promote the physical, social, emotional, creative, cultural and cognitive development of young children in an overall way should be provided. Care and education should be integrated in the curriculum and the development of self-esteem, confidence, independence and interest in learning for young children and infants should be facilitated at all times. A set of national curriculum guidelines for developmentally appropriate programmes and practices should, when developed, provide the basis for the early childhood curriculum.

As soon as children turn five, however, the focus of the curriculum has changed. The Draft National Curriculum of New Zealand document of 1991 emphasises: (p.1) the need to 'define a range of understandings, skills and knowledge that will enable students to take their full place in society and to succeed in the modern competitive economy'. It sets out seven principles: Principle 1 looks towards success in a modern competitive society, Principle 2 lists the basic subjects of English, mathematics, science and technology, Principle 3 indicates the need for a continuum of clear learning objectives [for all children], Principle 4 allows the curriculum to adapt to changing social and economic needs (and, in the same sentence, the needs of students), Principle 5 looks for equal opportunity, and expresses a desire that all students fulfil their potential, Principle 6 is to ensure the recognition of all experiences, cultural traditions, histories and languages, including the unique place of Maori, and Principle 7 is concerned with building on prior knowledge and looks towards the world of work, further education, and training. Three of these seven principles are to do with education needed for work, or for the needs of the economy.

This difference between early childhood and school curriculum did not appear in the Curriculum Review of 1987 (Dept of Education 1987) which says, p.6:

> The learner is the central focus of schools. Schooling should encourage students to fulfil the hopes and expectations they have for their future. The sparkle in five-year-olds' eyes when they begin school must be sustained.

Not one of the 15 Principles of the National Common Curriculum in the 1987 Curriculum Review mentions the economy.The aims of education are for students to discover their talents and abilities, personal best performances, learning how to learn is seen as 'an essential outcome', learning must be broad and general, and the curriculum should be of the highest quality so that every child can 'develop fully as an individual and as a member of the community' (p.10).

A national curriculum for schools is not just about education, it is about the perceived nature of education of the government of the day. All such government documents probably tread a more or less delicate line between what is sometimes called an instrumental or utilitarian view of educational outcome and a personal, individual, or developmental view.

The U.K. Education Reform Act of 1988, for instance, called for a balanced and broadly based curriculum which (i) promotes the spiritual, moral, cultural, mental, and physical development of pupils at the school and of society and (ii) prepares such pupils for the opportunities responsibilities and experiences of adult life. The utilitarian view is at its most unambiguous form when that education consists of training for a job. This is not just an educational dilemma of the 1990s. The 1942 Thomas Report (NZ Education Department ,1942) describes the 'basic values a democratic school system should cherish and the kind of person it should set out to produce':

> 'people who are not only self-disciplined and free in spirit, gifted in work and in enjoyment, worthy and desirable as persons, but also responsible and generous in social life, able to give and take freely from others, willing to serve social ends and to lose themselves in social purposes greater than themselves'

The Report goes on to lament that 'in practice both personal needs and social needs have all too often been pushed into the background, especially by economic pressures. The nature of the education a pupil has been given has frequently been determined less by what his (sic) teachers have believed he (sic) actually requires, even for vocational purposes, than by the demand for attainments that can readily be marketed'

Perhaps we don't know enough about the market: a mail survey of industrial employers (Coviello and Kirk, 1987) found that the top five skills/abilities desired of science and technology graduates were: ability to learn on the job, problem-solving skills, written communication skills, oral communication skills, and ability to work in a group.So the debate between those who see education as a process of individual growth and development (the developmental view) and those who see education as preparation for the next step, as pre-specified objectives (the utilitarian view) is currently a very lively one in this country. We in early childhood are not immune from the debate, as working parties prepare achievement targets that may begin at age five. Achievement targets for age five may well be an extrapolation back of achievement targets at middle primary, without any reference to development and growth in the first five years. Current national curriculum and assessment initiatives for schools do not support a developmental approach. The 1991 NAEYC & NAECS/SDE guidelines for appropriate early childhood curriculum in the United States are very specific about their approach (p 29):

> 'Curriculum should be grounded in the most current knowledge of child development and learning. The prevailing world view reflects a developmental, interactive, constructivist approach to learning that is not limited to the almost exclusively behaviorist approach that permeated curriculum and assessment in this country for the past several decades'.

Such dichotomies (developmental vs utilitarian) however, tend to describe education in rather simplistic terms, and unless we acknowledge the complexity of curriculum issues, we are in for accepting for a child an absurd shift in curriculum on her or his fifth birthday.

The NAEYC and NAECS/SDE guidelines (p.24):

> The curricuulum debate over content versus process... is really symptomatic of the fact that early childhood educators tend to emphasise spontaneous, constructed knowledge while traditional public education tends to consider only school-learned, social-conventional knowledge as legitimate learning.

They quote Eisner and Vallance (1974) to warn against common fallacies that mark curriculum debate; two of these fallacies say that (a) process should be emphasised to the exclusion of content (placing 'utmost importance on how children learn, rather than what they learn') (b) content should be emphasised over process, assuming that 'there is a body of content that all students should master' (NAEYC & NAECS/SDE, 1991 p. 23)

In order to explore these fallacies further, we will look at two models of early childhood curriculum:

1. A model of early childhood curriculum that comes from the direction of 'content'.
2. A model of early childhood curriculum that comes from the direction of 'process'.

**An early childhood curriculum: model one**

Model one starts with content, and links early childhood curriculum with education across the lifespan.This model could take as a starting point the list in the Meade Report *Education to be More* (Department of Education 1988) of what children develop from good-quality environments (p.13):

- self-confidence and trust and a deeper understanding of their own identity
- social skills for good relationships with their peers and other adults
- a love of learning
- language concepts and vocabulary
- mathematical and spatial concepts and language
- ways of representing ideas and experiences
- decision-making and problem-solving skills
- willingness to apply effort to worthwhile tasks
- creative expression
- competence in physical skills
- an elementary understanding of their environment
- understanding of time
- a value base, and powers of judgement

An example of this model is the U.K. 1990 Rumbold Report "Starting with Quality", the Report of the Committee of Inquiry into the Quality of the Educational Experience offered to 3 and 4 year olds (U.K. DES, 1990) which adopted as its main framework the same list of areas of learning and experience as a 1985 U.K. curriculum document 'The Curriculum from 5 to 16: Curriculum Matters 2' (UK DES 1985, p.16):

- aesthetic and creative
- human and social
- linguistic and literary
- mathematical
- moral and spiritual

physical
scientific
technological

It has been said in many arenas that the developmental concern and interest of young children is to 'make sense of their world' (Bruner and Haste 1987, Bower 1977, Harris 1989, Donaldson 1978). The above areas probably describe their world quite well; each community may want to give different priorities to different areas, depending on the cultural context and the age of the child.

We can put the areas of learning and experience from the Curriculum Matters document alongside the list in the Meade Report:

| | |
|---|---|
| HUMAN AND SOCIAL: | self-confidence and trust and a deeper understanding of their own identity<br>social skills for good relationships with their peers and other adults<br>a love of learning |
| LINGUISTIC AND LITERARY: | language concepts and vocabulary |
| MATHEMATICAL: | mathematical and spatial concepts and language |
| AESTHETIC AND CREATIVE: | ways of representing ideas and experiences<br>creative expression |
| PHYSICAL: | competence in physical skills |
| SCIENTIFIC: | an elementary understanding of their environment<br>understanding of time |
| MORAL AND SPIRITUAL: | a value base, and powers of judgement |

Similarly the 'Essential Learning Areas' from the 1991 National Curriculum of New Zealand document (Ministry of Education 1991) could equally well line up alongside the Meade aims:

language
mathematics
science and environment
technology
social sciences
the arts
physical and personal development.

It is worthwhile looking more closely at two areas of experience and learning as they might apply to an early childhood setting: human and social, and literacy.

(i) *Human and Social*

*Human:* Curriculum aims from the early childhood education charter guidelines include 'self-esteem, confidence, independence'. The Meade Report includes 'trust and a deeper understanding of their own identity'. In order to see more clearly a curriculum path for such aims, we need to look more closely at Erik Erikson's work (Erikson, 1950), and at the work of developmental psychologists such as Michael Rutter (1986) and Paul Harris (1989).

Erik Erikson, drawing on his work with adults within a psychoanalytic framework, describes the growth and crises of the human person as the development (or not) of a series of basic attitudes: for the 0-4 age group these are (i) a sense of basic trust (ii) a sense of autonomy, and (iii) a sense of initiative.

(i) Trust. "..consistency, continuity, and sameness of experience provide a rudimentary sense of ego identity which depends, I think, on the recognition that there is an inner population of remembered and anticipated sensations and images which are firmly correlated with the outer population of familiar and predictable things and people"... (p.241)"Mothers [and caregivers] create a sense of trust in their children by that kind of administration which in its quality combines sensitive care of the baby's individual needs and a firm sense of personal trustworthiness within the trusted framework of their culture's life style"

(ii) autonomy. A sense of autonomy needs the 'gradual and well-guided experience of the autonomy of free choice" (p.244) "From a sense of self-control without loss of self-esteem comes a lasting sense of good will and pride" (p.246)

(iii) initiative. "Initiative adds to autonomy the quality of undertaking, planning, and 'attacking' a task for the sake of being active and on the move" Meaningful problem-solving and caring for younger children provide contexts for such a development.

Paul Harris documents the increasing ability of young children to make sense of their emotional lives, an ability of enormous importance if they are to be better able to cope with distress and anxiety. (p.76) "The child is a theoretician about the psychological realm long before he or she starts to construct theories in physics or biology" (or mathematics, or reading). From an early age children understand the importance of beliefs and desires for interpreting behaviour, and they are developing the useful ability to **imagine** the beliefs and desires that other people may have. Many children (autistic children find it very difficult) appear to use working models (or mini-theories, Claxton (1990) in their heads to make predictions about reality and to enter into the emotional lives of other people. From the age of five months, and possibly earlier, an infant will respond appropriately to different facial expressions, especially if these expressions are accompanied by variations in tone of voice. Responses to emotion from the adult included immobility when the caretaker expressed anger, looking away and playing less when she appeared sad. Emotional dialogues between adult and baby begin early and are important: by 12 months infants are guided by an adult's emotion in their behaviour and attitudes towards objects or events in the environment.

*Social:* Vygotsky and Bruner have always emphasised the social context of learning (Bruner and Haste 1987, Meadows 1983). The relationship between adult and child is a central feature of the curriculum: Tizard (1986) writes about the close relationship in good child care practice between familiarity, attachment , and responsiveness, and adds that the latter, responsiveness, has an important role in learning. Rutter (1986 p.817) : 'It is clear from a variety of studies that maladaptive parenting does not lie primarily in a paucity of conversation or play, or an excess or deficiency of discipline. Rather it involves a lack of sensitivity to children's cues so that interactions derive from parental overtures rather than those of children; a poor 'mesh' in parent-child interactions'. In other words, in this framework, social interaction is both an area of experience and learning and a learning strategy or developmental principle (see Model 2). This is true for relationships with peers as well. Tizard cites research (Rubenstein and Howes 1983) that shows that experience with peers decreases dependence on primary caregivers and increases children's ability to explore and learn from the environment. The ability of a young child to take another's point of view, to 'decentre' develops during the early years (Donaldson 1978); Rubin(1983) has researched aspects of this ability in four year olds' friendships. Judy Dunn (Dunn and Kendrick, 1982) has shown that children of 14 months will attempt to comfort an older sibling if she is upset, and children as young as two and a half will adjust and simplify their language appropriately for a younger sibling.

Lilian Katz (1983) p.61 clearly sees the human and the social as being of central importance when she lists the behaviours we should be observing: sleeping, eating, toilet behaviour, range of affect, variations of play, curiosity, responses to authority, friendships, interests, spontaneous affection, enjoyment. It can be argued that for early childhood it is the human and the social which are the key or core areas of experience and learning.

(ii) *Literacy*

The most logical way to prepare children for reading would appear to be to teach some phonics and some sight words. But practitioners and researchers have added other ingredients to this simple recipe, and it is apparent that the relationship between the material to be learned and the learner is not that straight forward. The child's unique processing abilities and experience alters the dialogue between the syllabus and the child, a point made clear by Piaget Vygotsky and Harris: the learner is not a vessel to be filled; young children learn from actions rather than from passive observations (Piaget and Inhelder 1969), the social and cultural context is important (Vygotsky 1968) and emotional factors are central (Harris 1989).

The reading world continues the debate between the traditional approach to learning to read, with its early focus on sounds, blends, diagraphs and the beginnings and endings of words, and the 'whole language' or apprentice approach which is based on the belief that an explicit prior knowledge of rules and skills is not a necessary prerequisite to beginning reading. Margaret Mooney's (1988) useful work on early reading has informed early reading progammes in New Zealand: she describes some of the **attitudes, understandings**, and **behaviours** of an 'emergent' reader:

the **attitudes** include:
- is keen to hear and use new language
- shows pleasure in the rhyme and rhythm of language
- enjoys "playing" with language
- is keen to listen to stories, rhymes and poems..
- expects books to amuse, delight, comfort, and excite
- expects to make sense of what is read to him/her

the **understandings** include:
- knows language can be recorded and revisited
- knows how stories and books work

the **behaviours** include:
- 'plays' at reading
- handles books confidently
- interprets pictures
- uses pictures to predict text..
- returns to favourite books

Donaldson (1978) introduces the idea that 'disembedded thinking' is an important aspect of early learning : experience in predicting, hypothesising, and imagining. Blank (1985) relates this to learning to read: ' Disembedded language, represented by questions requiring such processes as prediction (for example "What will happen..?") and justification (for example "How did you know....?") is mastered by children 5 years of age who are likely to succeed in reading, and poorly mastered by children who are at risk for failure to read.' Donaldson includes logical reasoning as another example of this useful abstract or disembedded thinking: thinking that has been prised out of the concrete context in which it developed, like the prising of a clay medallion from its plaster mold.

Joy Cullen (1988) distinguished between strategic and non-strategic four-year-olds, and found that learning strategies acquired at preschool served children well during reading and writing classes at school: asking for help from an adult, asking for help from peers, self-monitoring, choosing their own resources, seeing oneself as a source of help for others.

Research in maths has highlighted the role of feelings in learning as well. Hughes studied children aged 6-7 years, working in pairs to programme a 'turtle' to go around specially constructed obstacles. Girls who worked together took nearly twice as long to complete the task: the researchers conclude that at least part of the difference was due to the way the girls reacted to a situation involving failure. The girls in the first project were much worse at freeing the turtle when it crashed, reacting in an emotional and fearful manner rather that thinking and talking about what went wrong. This is supported by Carol Dweck's (1986) work which suggested that girls are less comfortable about taking risks. Bar-Tal (1982) emphasises the important role of the teacher or caretaker in the development of attribution: whether one attributes success to ones own efforts or to chance makes a difference to one's motivation; no doubt this too is context-specific, and very relevant to subject areas like mathematics and reading.

Finally, there are social factors, relevant to later learning at school. The value of social skills in learning was also identified by Sylva in 1980 when she looked in nursery schools for 'complex play': "it seems that a child's social participation is not only the 'classroom' for acquiring personal skills, it is also the scene of his [or her] most complex and creative thought". Human and social qualities are therefore not only valuable personal or human aims, they are important for utilitarian reasons as well: they facilitate learning in more that one area of experience.

**An early childhood curriculum: model two**

Model 2 starts with process. This model could take as its starting point the 15 basic principles for an early childhood curriculum developed at Lopdell course in1988 (Department of Education 1988): The curriculum will enable all children to experience an environment in which:

they learn who they are
they are safe
they are healthy
they relate positively to others
they enjoy themselves
they learn in appropriate ways
they respect the natural environment
there are goals for children
learning is not limited by gender
learning is not limited by race or colour
decision making is shared
conflict is resolved peacefully
the importance of home and family is recognised
adults are learners
people are accountable

An example of an early childhood curriculum based on process-like principles is the NAEYC & NAESS/SDE document, which sets out 20 guidelines for appropriate curriculum content. Blenkin and Kelly (1987) try to solve the dilemma of content vs process by differentiating between 'extrinsic aims' and 'intrinsic principles' (or developmental principles), suggesting that an early childhood curriculum should be concerned with the latter while a traditional national school curriculum will be made up of the former. A developmental principle is just as important, but it won't appear on the education ledger as a measurable output. They use 'literary appreciation' as an example: 'One does not encourage the development of, say, literary appreciation at its end, but by offering a series of experiences which from the outset have literary appreciation as a major feature and a consistent principle of planning and provision'. (p.9). If we describe 'developmental principles' as learning strategies (including attitudes), and 'extrinsic aims' as knowledge (or understandings) and skills, there is no reason why a national curriculum shouldn't include both of these, at the early childhood and at the school level. That is, unless we completely tailor our curriculum towards assessment of output, only trying to teach those things that we can readily assess: knowledge and skills in their most restricted sense. It is a good rule that assessment should follow on from what we consider to be a good curriculum (Carr, 1990), rather than the other way about. Such assessment matters will not then be straightforward: they never are, as ABLE (1990) points out for schools. But the right way to go about curriculum planning at any level is to start with the appropriate curriculum and then to look at how to assess or evaluate it. And then to keep a look out to ensure that the assessment doesn't skew the curriculum offered to the children.

The importance of learning strategies, or learning 'how to learn', right across the lifespan is emphasised by Howe:(1984, p.14): 'No educational objective is more important for students than learning how to learn, and how to function as an independent, autonomous learner...A person who leaves school ill-equipped with competencies required for learning independently throughout the remainder of life is at a severe disadvantage'. Examples of strategies and attitudes seen as important for early childhood by both practitioners and researchers are: autonomy (Kamii,1985; NAEYC & NAECS/SDE, 1991), curiosity (Blenkin and Kelly, 1987), a feeling of being in control, being responsible (Hughes, 1990), independence (Papert,1990), 'disembedding' or being able to refer to things out of context, away from the here and now (Donaldson, 1978; Hughes,1983; Cummins, 1984), accepting that you can be wrong and being therefore prepared to risk failure (Donaldson, 1980; Dweck, 1986; Hughes,1990), reflection, thinking about learning (Cullen,1988), perseverance (Sylva et al., 1980), decision-making and problem-solving skills, and willingness to apply effort to worthwhile tasks (Meade Report).

Smith and Swain (1988) call for 'developmental rather than curriculum goals' for childcare, and they list these under the headings of intellectual growth, social goals, emotional well-being and physical well-being. Blenkin and Kelly (p.39) cite research which draws attention to the significance of children's feelings about 'not knowing' in their first experiences of formal schooling: 'Children need to feel and to know that is is safe and acceptable to 'not know''. They suggest that closely allied to this concept is the acceptability of 'not doing':we should provide opportunities for thinking, day-dreaming and observing. Instead of the three Rs we could devise the five Cs: communication, confidence, curiosity, creativity, and culture. These lists of learning stratcgies or developmental principles are not culture-free; the NAEYC & NAECS/SDE document elaborates(p.27):

> An important American value is personal autonomy, possessing the inner resources to function as a contributing member of a free society. The long-term goal of American education is not only to help children develop personal integrity and fulfillment but also to enable them to think, reason, and make decisions necessary to participate fully as citizens of a democracy (Dewey 1916).

We can make another list: tikanga, rangatiratanga, whanaungatanga; or (Pere 1988): wairuatanga, mana ake, mauri, ha a kore a kui ma, taha tinana, whanaungatanga, hinengaro, waiora. A limited view of a culturally appropriate curriculum says that culturally specific *content* should be selected as part of the curriculum; a wider view acknowledges that culturally specific *developmental principles* or *learning strategies* are paramount. In Bruner's terms, the important principles are to do with the way the world is represented: children from different cultural backgrounds will make sense of the world in different ways. This is why language is so important: different languages reflect different conceptual systems. Blenkin and Kelly (1987 p.24) cite Eisner who argues that

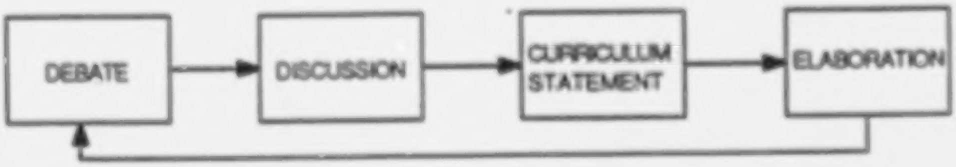
> 'schooling systems of the traditional [Western] kind tend to overemphasize experiences which lead to discursive and numerical forms of thinking and learning, and consequently reduce the opportunities for developing the ability to represent a wide range of sensory experience and thus for conceptualizing this experience'

### Models one and two combined

We have used the above two models to illustrate that the distinctions between utilitarian and developmental, content and process, are not simple: we can define utilitarian goals (e.g. literacy) in developmental terms, we can translate process into content (e.g learning strategies). Developmental psychology also tells us that **strategies and attitudes** such as curiosity, being willing to risk failure and 'not know', being able to think about things that are not in front of you, develop in a context; they don't begin as general learning strategies or attitudes (and some may always be tied to a context) (Claxton, 1990; Perkins and Salamon, 1989; Greeno, 1989). A four year old will learn not to speak in certain places and with certain people; a two year old may be very curious about what the caregiver is doing, but not at all curious about what's in the feely box. More than that, it suggests that one doesn't treat 'independence' and 'mathematics' as isolated areas of the curriculum: the first is a context for the second and the second is a context for the first (being able to calculate how many spoons are needed will contribute to your becoming an independent table-setter, and being able to disagree with your friend will assist you with mathematical problem-solving). We might contemplate a two-way matrix: areas of experience and learning and the skills and knowledge attached to them on one axis, learning strategies and attitudes(or developmental principles) on the other.

## AN EARLY CHILDHOOD APPROACH TO CURRICULUM DEVELOPMENT

The 1988 Meade Report and the 1988 Lopdell Report formed the basis for the above discussion of two models of curriculum. The process of curriculum development began well before the contract to prepare guidelines was proposed by the Ministry.The idea of an early childhood curriculum was discussed and experience and ideas were shared at Lopdell Courses in February 1988 (The Curriculum: An Early Childhood Statement), September 1988 (Taha Maori in Early Childhood), and February 1989 (Developmentally Appropriate Programmes in Early Childhood), and at earlier Lopdell courses on early childhood topics, including Infant Programmes, Family Daycare, Special Needs/Mainstreaming, Music etc. 'The Curriculum: an Early Childhood Statement' was widely disseminated, and draft guidelines on developmentally appropriate programmes for early childhood practitioners were developed from this statement at the 1989 Lopdell course. The writing of the Meade Report (1989), and the Before Five Working Party on the Charter and National Guidelines (1989) further involved early childhood personnel from a wide range of services in debate and discussion about curriculum in early childhood. The Ministry of Education has used these documents in the formulation of the curriculum requirements for the *Early Childhood Centre Regulations 1990* and *Statement of Desirable Objectives and Early Childhood Education Charter Guidelines 1990.* A circular model of curriculum development has been operating:

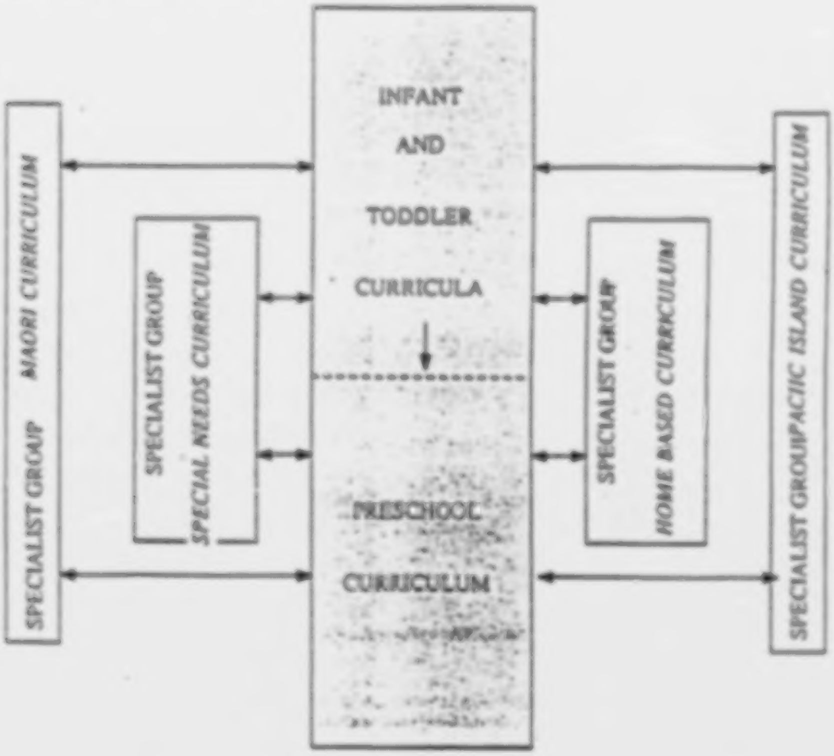


We would continue this model, but add an observation/trialling phase. The Curriculum Development Team is made up either of practitioners or people with access to practitioners, and the next stage in the curriculum development process is to further elaborate on the ideas already developed and reflected upon, and to trial them in centres. Each member of the Curriculum Development T will consult with and trial in a group of centres. Throughout this process, there will be consultation with all services through working papers and advisory meetings.

If we look for a philosophical framework to encompass the work that has gone before, it may be a useful metaphor to think of the enormous quantity of writing on early childhood curriculum as a forest of kauri, rimu, and rata. Because of the immaturity of very young children, and the non-compulsory nature of the services, the forest is also strewn with ideological disputes and conflicting beliefs (Katz, 1975; Roopnarine and Johnson, 1987).We can do no more here than find a tentative path through the forest; we will use some tall kauri as markers, even although they will not necessarily be themselves on the path. Four tall kauri provide important guides: Piaget (Piaget and Inhelder, 1969), Erikson (1950), Vygotsky (1968), and Bruner (Bruner and Haste 1987). They help us to describe an early childhood path, in particular they provide two main principles of learning: we are concerned with the whole child and a developmental framework (Piaget and Erikson), and with learning in a social and cultural context (Bruner and Vygotsky).

### The Whole Child and the Developmental Framework

Writers have begun to integrate the contribution to learning theory of Piaget and Erikson to describe developmental paths for early childhood, and to integrate the physical, the emotional, the cognitive, and the social. An example is Case (1988), who writes about the converging of cognitive-developmentalists and psychoanalysts to provide a series of interests and developmental tasks at different ages from 0 to 5. The Early Childhood Curriculum Statement, prepared at Lopdell in 1988, and further elaborated at Lopdell in 1989 , and the concept of 'learning strategies' across areas of learning and experience, supports just such an integrated view of the young child's physical, cognitive, social, and emotional development. The structure of our proposal as set out below builds on a developmental framework such as those of Piaget, Erikson, and Case: it maintains that the developmental tasks for infants, toddlers, and pre-schoolers are sufficiently different to provide the central structure for the working groups. The two central working groups are Infant & Toddler (ages 0-2) and Preschool (ages 3-4) . Each will inform the other, however; they are not mutually exclusive. Nor does this make any statement about separating or integrating the age groups in centres.


INFANT AND TODDLER CURRICULA
PRESCHOOL CURRICULUM
SPECIALIST GROUP *MAORI CURRICULUM*
SPECIALIST GROUP *SPECIAL NEEDS CURRICULUM*
SPECIALIST GROUP *HOME BASED CURRICULUM*
SPECIALIST GROUP *PACIFIC ISLAND CURRICULUM*

The curriculum development team and its respective consultant groups will work together with common goals but will also subdivide into separate groups with special goals

The specialist groups will work both separately and within the main working groups

Each specialist group co-ordinator will recruit an appropriate consultant group

### The social and cultural context

Vygotsky and Bruner are the tall kauri who remind us that learning is not context-free; it is embedded in a social and cultural context, and connections must be deliberately made between different contexts Bronfenbrenner (1979) writes of just such a need for links between the 'microsystems' of, for example, child care centre and home.This means that the curriculum for young children in centres must link with other contexts; it must be culturally sensitive for good learning as well as for reasons of equity. There is a further corollary to this principle, which can only be touched on here; it needs further elaboration. There is a philosophy of child care which says that although good quality centre care is not inferior to good quality all day home care, or harmful to the child, it is in a sense the second best option. We do not subscribe to that theory, and would like to set another in its place. The research on the social and cultural context of learning has informed theories about bilingual children (Cummins, 1984). There are strong arguments that the child who is bilingual has a cognitive advantage, in comparison with the mono-lingual child. We would argue, and the elaboration of this argument will have to await another time and another place, that the child who has good quality care at centre and at home has a richer 'tool-kit' of learning strategies, friends, and interests, for making sense of the world than the child who is mostly cared for in one environment. As with the bilingual analogy, however, the education and care in each context must be of high quality for the child to be genuinely 'bi-focal' or 'bi-mondial' (of two worlds). It is this concern for high quality early childhood care and education that underlies our proposed framework.

### An Integrated Curriculum Example

The two contractors, Helen May and Margaret Carr, developed many of these ideas about curriculum in 1988 when they worked together to prepare early drafts of the three year integrated early childhood programme at Hamilton Teachers College.

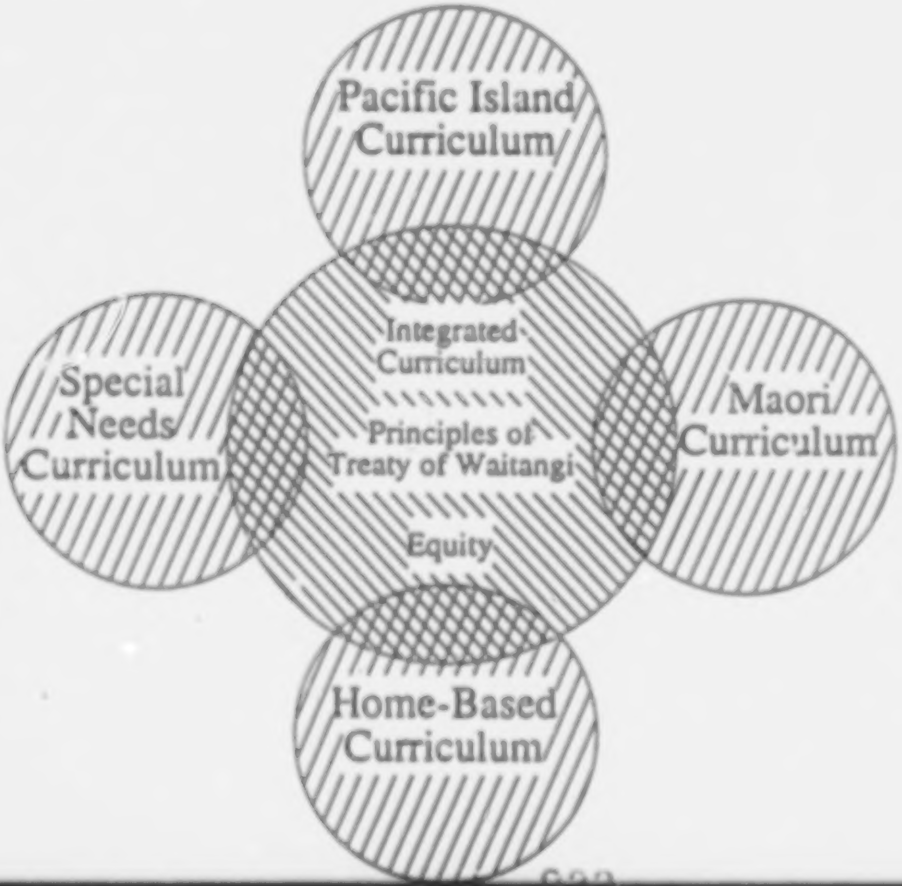
The first decision we made then was that the curriculum strand, Learning Caring and Development would not be subject based as in primary school programmes and indeed the old kindergarten training programme, but should integrate care and education, child development and curriculum, and focus on the following areas of a child's development: Learning Through Play, Health Nutrition and Safety, Moving and Growing, Expressive (creative) Activities, Making Sense of the World, Language Development, Socialising with Others.

The second decision we made was that theory and practice would be integrated in the curriculum strand: theories about learning and teaching (or adult-child interaction, including child management practices) and human development would be considered within the above curriculum areas.

The third decision that was made was that each course within the strand must address the following integral themes: biculturalism, multiculturalism, equity, linking with families and parents, developmental considerations of infants toddlers and preschoolers, and special needs. We have since added another integral theme, the early school years. This curriculum, developed as a new approach to early childhood training, fits with the proposed framework for an early childhood curriculum in Aotearoa/New Zealand.

## The distinctiveness of an early childhood curriculum for Aotearoa/New Zealand

While there is a certain international commonality in early childhood curricula, particularly in relation to its developmental and theoretical frameworks, we also argue that the distinctive features of early childhood in Aotearoa/New Zealand brings strength and richness which must be recognized and visible in the national curriculum guidelines. The diagram below characterises this and this structure is reflected in the arrangement of the various working groups of the project. Within Aotearoa/ New Zealand itself there is also both commonality and differences amongst the various early childhood services. The guidelines will have common curriculum goals but within the commonality there will be flexibility for the diverse early childhood services to meet the requirements of the guidelines in their own distinctive way. The following are some of the distinctive features of the early childhood curriculum in Aotearoa/New Zealand.



### *Biculturalism: The Treaty of Waitangi and a Maori Curriculum*

A principle that was central to the 1988 Curriculum Statement and to the Early Childhood Education Charter Guidelines (Ministry of Education 1990) was the principle of partnership embodied in the Treaty of Waitangi. This acknowledges the separate and special identity of the Maori, an identity that has been reflected in early childhood in the development and growth of nga Kohanga Reo, with their own training and curriculum.Therefore any proposal for early childhood curriculum development must recognise the special identity of a Maori curriculum. Nga Kohanga Reo has consolidated a lot of work towards the establishment of a Maori curriculum in comparison to previous Department of Education curriculum initiatives which looked at Taha Maori in the mainstream curriculum. Biculturalism is an integral theme for the proposed infant, toddler and preschool curricula: the Treaty also affirms the right of each and every child in Aotearoa / New Zealand to be enriched in an environment which acknowledges and incorporates the values and language of the Tangata Whenua. The overlapping circles in the above diagram indicate how this fits with the structure proposed here. It is proposed that members of the Maori specialist group will advise and be consulted by the infant/toddler and preschool groups both of which themselves have members who have worked on Maori curriculum initiatives and it is intended that there be identifiable Maori components in the guidelines as well as a component which reflects our growth towards a bicultural society.

### *Equity: A Special Needs Curriculum*

A second principle that was also central to the 1988 and 1989 deliberations was that early childhood curriculum should support equitable outcomes for all, regardless of ethnicity, gender, disability, class, religion/belief or location. Subsequent Ministry documents have endorsed this principle. Considerable work is currently being undertaken in training programmes to address the issues of anti racist and counter sexism strategies in early childhood centre programmes. The curriculum guidelines will seek to expand on this. The principle of equity also includes the principle that children with special needs and their families are entitled to have their needs catered for by the curriculum of the centre they attend. The curriculum development structure proposed here reflects this: a specialist consultative Special Needs group will work both alongside and within the infant/toddler and preschool working groups. Considerable work has been done in Aotearoa/New Zealand on the curriculum of and evaluation for children with special needs.

### *Multiculturalism: Pacific Island curriculum*

There are many cultures participating in early childhood education and the Early Childhood Education Charter Guidelines endorses the principle that centres "reflect the values and customs and differences of the families of the children attending". Because of the large number of Pacific Island children in New Zealand and the establishment of Pacifica Island training and language nest centres, it is intended that Pacific Island Curriculum be clearly identifiable in the overall curriculum guidelines. The idea of a Pacific Island early childhood curriculum is relatively new in New Zealand but the work of Anau Ako Pasifica, the rapid growth of Pacific Island language nests, the Pacific Island training wing of Te Pari Puna Ora O Aotearoa / New Zealand Childcare Association, and the recent formation of the Pacific Early Childhood Education Association of Aotearoa provide a strong foundation for further development.

*Home and centre links: Home - Based curriculum*

Early childhood programmes in Aotearoa/New Zealand have always made close links between the home and the centre. Many centre have operated out of homes, but more recently, the home has been able to be a 'centre' in the sense of providing a recognised care and education programme. Home based programmes have been around for some time but there has been less consideration given to the idea of a home based curriculum. An exception must be the home based programme piloted by Anau Ako Pasifika and there has been a Lopdell course which looked at family daycare issues. The *Report of the National Guidelines Working Group for Before Five* (1989), made a first attempt at codifying a minimal curriculum and evaluatory criteria for home based programmes but most of this did not survive into the later regulatory requirements for chartering. The recent formation of a Family Daycare Association has given further impetus to the task defining and codifying the distinctiveness of the early childhood curriculum in the home setting.

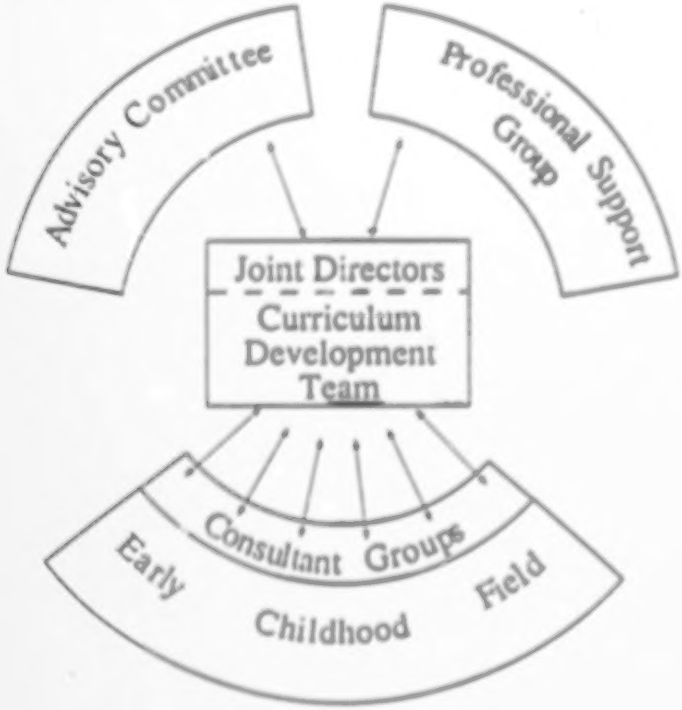
*Continuity of development and learning: The Early School Years*

The official demarcation in New Zealand of early childhood education being for children under the age of five is artificial from a developmental perspective. The separate and distinctive trainings and philosophies of teachers in early childhood and school has led to a mismatch in terms of what happens in each setting. It is important that an early childhood curriculum articulate a clear philosophy of practice that shows a continuity of development and learning experiences from preschool to school. But it is also essential that the discourse of what constitutes a curriculum appropriate for the early school years incorporates an early childhood perspective. It is proposed that the early childhood curriculum guidelines will demonstrate how there can be a continuity of learning experiences, even though the processes and settings may be very different. The learning areas outlined in the draft National Curriculum Guidelines (Ministry of Education 1991) will form the basis of these connections.

*Parent - professional partnership: Parents/Whanau*

The establishment of most early childhood programmes in New Zealand has been through parent initiative and lobbying. This is reflected in the ownership of early childhood services which involves various forms of state - voluntary partnerships with community groups. This involvement of parents/whanau in the programme and in many cases a reliance on parents/whanau for staffing, has meant a close relationship between the home and early childhood education settings, not not always seen in other countries. It is important that this is reflected in the early childhood curriculum guidelines.

## A FRAMEWORK FOR DEVELOPMENT OF CURRICULUM GUIDELINES



The curriculum development proposal brings together a mainly Waikato consortium of expertise. The advantages of which are that many of the people have worked effectively and efficiently together on various projects in the past; geographic proximity eases communication and reduce costs; and the Centre for Early Childhood at Waikato University provides a large organisational umbrella in which to house the project. Most of the work will be done by a Curriculum Development Team. Membership of this team is made up of the joint directors, the co-ordinators of four specialist working groups: Maori, Pacific Island, Home Based and Special Needs, plus three members of an infant toddler working group and and three members of a preschool working group. The membership of the Curriculum Development team as a whole was constructed to meet the following criteria:

There is early childhood expertise that is nationally recognised

There is representation of people/organisations who have experience in a range of early childhood services

There are people affiliated to different early childhood organisations

There are people who have a range of perspectives on early childhood ie: academic training, management, advisory,worker, supervisor, teacher, parent, voluntary, political.

There are therefore six working groups associated with the development of the guidelines. Their relationship to each other is broadly shown in diagram One. It is proposed that working groups will operate to integrate and separate both specialist and developmental strands as set out in this diagram

**Infant/toddler and preschool working groups:**

*Key tasks:*

To work as part of the Curriculum Development Team to define the areas of the early childhood curriculum and to develop common goals appropriate for all early childhood settings.

To work consultatively with special groups towards integrated curriculum guidelines.

To consult and trial in a range of early childhood settings.

To develop curriculum guidelines appropriate to each age level.

Co-ordinator Infant/toddler Working Group: Helen May
Working Group: Mary Alice, Gill Dowson, Val Ford, Maureen Locke

Co-ordinator Preschool Working Group: Margaret Carr
Working Group: Diane Calder, Coralie Minne, Robyn Muriel, Rita Walker

**Specialist working groups**

*Key tasks:*

Each Specialist Group Co-ordinator is responsible for forming a small consultative group from their own area of expertise or community interest.

To work as part of the Curriculum Development Team to define the areas of the early childhood curriculum and to develop common goals appropriate for all early childhood settings.

To develop a specialist perspective on the common goals and guidelines appropriate to own particular setting

To work both alongside infant/toddler and preschool working groups in the development of the curriculum guidelines appropriate to the different age levels.

To consult and trial the specialist and common aspects of the guidelines in their respective early childhood fields

Co-ordinators:

| | |
|---|---|
| Maori: | Te Kohanga Reo Trust |
| Pacific Island: | Iole Tagoilelagi |
| Home based: | Carol Nicholson |
| Children with Special Needs: | Jill Mitchell |

## Early Childhood Field

Outside of the curriculum Development Team and its consultant groups, is what we have termed the "Early Childhood Field". It is this amorphous group of many diverse organisations and interests who will have to work within the guidelines developed and it is therefore crucial that they are participants in the process. This will occur in two ways:

Firstly, there will be a series of workshops held in different locations of New Zealand and hosted by the different working groups. The intention is to invite practitioners in each geographic and/or interest area to have input and/or critique the goals and guidelines as they develop.

Secondly, each working group will trial the guidelines in selected centres to ensure that they are appropriate to what happens in a range of centres and that it will possible later to develop appropriate criteria for the evaluation of the guidelines.

## Advisory and Professional Support

The involvement of interested organisations occurs separately and all the national early childhood organisations are invited to have representation on the Advisory Committee to the project. This Advisory Committee will have both consultative and advisory functions for the Project. Membership will also include representative from the Early Childhood Divisions of the Colleges of Education, the University Education Departments and NZCER. There will be two advisory meetings held during the projects, and all national early childhood organisations will be invited to make formal submissions on the goals and guidelines.

The directors have also got a Professional Support Group who will act as informal advisers on matters of curriculum and evaluation. They are Drs Anne Meade, Geraldine McDonald and Beverly Bell.

## Government Agencies

Our contract is with the Ministry of Education. We are, however independent of the Ministry as long as we meet the tasks and milestones set out in our negotiated contract. The Ministry, however, has its own review team to whom we are accountable financially and in terms of the tasks and milestones and who may choose to give us advice on the project. It is intended to develop close working relationship with the Early Childhood Development Unit and see their role in facilitating consultation with the early childhood field. Contact with the Special Education Service will be made though the working group for the special needs curriculum area. It is unfortunate though that the Ministry will not allow any formal contact with early childhood colleagues in the Education Review Office. Their evaluatory role in relation to early childhood services is an integral part of the curriculum process. The early childhood community is unused to the arbitrary and artificial divisions that the current administrative frameworks impose.

### The process of development

In the proposed framework the assumption is made that considerable consultation and curriculum development work has already occurred, both in the respective early childhood communities and nationally, but it is recognised that the amount of previous work done in the respective curriculum areas is variable. There is an initial focus to co-ordinate this work before moving out into what we see as a second phase of development and consultation. It is proposed that working groups will operate to integrate both specialist and developmental strands. In the mainstream early childhood curriculum areas there has been a lot of work done but because of a growing consciousness and commitment regarding the principles of partnership there is a need for continuing reappraisal and development of a curriculum that acknowledges a bicultural New Zealand. Infant and Toddler programmes have grown considerably, but work has been done at Lopdell courses and there is also an important link to be made with the NZCER Infant Toddler Research programme whose researchers Val Podmore and Barbara Craig (1991) have spent time identifying the quality components of infant and toddler programmes. In relation to the mainstream preschool curriculum there is considerable documented curriculum material, although a lot of it is subject based which needs to be incorporated into the integrated framework we suggest. However, in relation to the specialist areas, less work has been done. It is for this reason it is important that these working groups can work and consult separately at times, each from their own perspective. We want the specialist aspect to inform the mainstream discourse rather than be a adaptation of it.

The project is scheduled to take 15 months. The team will work together to define the nature of the early childhood curriculum, draft the common goals, and then will break into strands which connect and disconnect throughout the process. The four specialist groups work apart from, but alongside the infant/toddler working group and later the preschool working group. The structure of the working groups and the personnel within them fits closely with our rationale on the process of curriculum development. We see that this structure is an effective one for addressing both the common and specialist aspects of our early childhood curriculum.The linear framework for the project is also based on the reality that all the people involved have other jobs and responsibilities and the time frame takes account of that. There will be three facets to the guidelines in each of curriculum areas which will be formulated as a progression:

goals --->guidelines--->consultation---->trialling---->.evaluation criteria

Compiling current resources

Consulting expertise

Defining an early childhood curriculum framework

Defining and establishing common goals

Work begins on infant and toddler curricula <------> specialist groups start work

trialling -observation-consultation

Draft infant toddler curriculum guidelines completed

submissions

Work begins on preschool curriculum <-------> specialist groups continue

trialling - observation- consultation

Draft preschool curriculum guidelines completed

submissions

Draft specialist aspects completed

submissions

Final version drafted and final submissions

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# THE INFORMAL MATHEMATICS OF FOUR-YEAR-OLDS:

## UNDERSTANDING ITS PURPOSE

Paper presented to the Fifth Early Childhood Convention
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Early language development has been analysed in terms of its social purposes or functions (Tough, 1976; Wells, 1985,1986; Nelson, 1981; Bruner, 1983), in order to provide an analysis of the developmental path and to account for cultural difference. Robbie Case argues that "In spite of Baldwin's [1895] call for a "purposive" developmental psychology, the role of children's objectives or purposes in their intellectual development has rarely been considered in much detail" (1988, p. 59). Although many studies of learning in mathematics have emphasised the importance of social context, this has not been done for early mathematical development. This paper outlines a possible framework for the analysis of the development of numerical thinking in terms of its social purpose.

A considerable literature has looked at mathematical learning in schools with the purpose of the activity as a focus. Cobb (1990) writes about the'contextuality of cognition' (p.200) where 'purposes or intentions are a crucial aspect of contexts' (p.201).

> For example, the setting might be mathematics instruction in which the students have been asked to complete a set of tasks. However, the contexts within which students attempt to complete the tasks might differ radically. For some it might be a matter of trying to recall what the teacher told them they were supposed to do, whereas for others the focus could be on mathematical sense making. These students are in the same setting but act in different contexts and engage in very different forms of mathematical activity' Cobb p.201

More complex skills will appear in familiar purposes, it is argued. For example, in a cross-cultural study of the information-processing capacity of aboriginal-Australian children and its relation to mathematical learning, tests of information-processing capacity used the children's knowledge of family relationships and the children's familiarity with playing cards (Boulton-Lewis, 1990).

An analysis which focuses on familiar purposes allows an examination of cross-cultural and historical differences in mathematical development and enumeration systems (Lancy,1983; Lave,1988; Wertsch,1985). Saxe and Posner (1983) have argued that 'the development of numerical thinking is embedded in social life', and Gal'perin and Georgiev (1969), that 'mathematics is, from the start, a social phenomenon'.

This is true of number systems as well (Lancy,1983 ; Harris, 1990). An important number base in classical Maori was determined by the size of an ancient fighting unit, 140, or seven groups of twenty: the word now used to denote ten, tekau, formerly referred to twenty, as elsewhere in Polynesia. One-hundred-and-forty was 'the common fighting strength of a war party, a fighting strength easily raised by a tribe of tribal group and sufficiently compact to travel undetected through hostile country' (Rikihana, 1988 p.29) 'The binary system was in everyday use, and persons were often so counted in 'braces' ' (pairs) (Best, 1924 p131).

What are the purposes of mathematical activity for four year olds? The EMI-4s study is a research project currently being carried out in kindergartens in the Waikato, primarily interested in children's understanding of quantity and their use of numbers. Observations were made of children participating in the free-play programme at kindergarten. The children had previously been interviewed to ascertain which were number experts and which were novices so that a small group of each type (4 novices and 4 experts) could be selected for detailed observation. A record was made of the child's activity choices, the actions performed by the child while engaging in particular activities, and the social context in which those activities occurred. In addition to this nonverbal information, the language of the child and those who interacted with the child was recorded using radio microphones and later synchronised with the observational record. Each child was observed on several different occasions over each part of a morning session, in order to build up a picture of the mathematics being used within the cultural milieux of the kindergarten. The activities and language related to concepts of quantity and number were coded according to the kind of purpose being used and the kinds of skills and understanding being displayed. The following categories were developed to differentiate the kinds of purposes being used:

1. Ritualised Number Use (R)
(includes adult-initiated as well as child-initiated)
- chants
- songs
- rote counts
C1: 4-5-6-7-9-8
C2: No, I count 1-2-3-4-5-6-7-8-9-10. Ten.
C1: 1-2-3-4

A popular action song:
Dr Knicker-bocker knicker-bocker number nine
He likes to dance and keep in time
Now let's get the rhythm of the beat (feet, hands, hips, lips)
Now let's get the rhythm of the number nine
1,2,3,4,5,6,7,8,9!

2. Status (S)
Establishing status using number language
- higher numbers, larger amounts, are better
- age
- winners, losers
C1: We know everything
C2: I know everything too
C1: No
C2: Yes
C1: No
C2: I can count
1-2-3-4-5-6-7-8-9-10-11-12-13-14-16
C1: No you've got to do up to a hundred
1-2-3-4-5-6-7-8-9-10-11-12-13-14-15-16-17-100
C2 My Dad is a Supercala-Superman

C3: I got heaps Rochelle. Look, I got lots Rochelle
C4: I got lots than you

3. Entitlement, establishing rights, fairness (E)
- sharing, discrete
- sharing, continuous
- turns
- rules
Four children are playing outside. C1 and C2 are boys, C3 is a girl.
C1 We're Ninja Turtles eh you three? There's one, two, three, four. And we three boys save somebody .....
C2 Serena you be the poopie
C3 No I want to be a shark
C1 No there is only two sharks eh?
C3 I'm one of the Turtle's mate.. so he can eat me up for supper.

Several children are waiting for a turn on the computer
Adult How did you manage to get another turn so quickly Billy?
C1 (B) I had another turn
Adult But I don't think some of these children have even had one turn yet
C1 She did
Adult Have you had a turn Serena?
C2 (S) I want two turns
C3 I haven't had a turn
Adult It's fair if everybody has one turn.

4. Timing (T)

- the number of sleeps, the number of minutes
- using or receiving an ultimatum (counting down or counting up)
- timing for an activity or for a game

There were no examples of timing at the kindergartens, but interviews with parents indicated that it was a common purpose for number at home:

Parent: I use seconds
I: Seconds? How do you do that?
P: I count up to ten, that's ten seconds. I'll give you ten seconds to do a certain thing. I'll start counting 1 to 10 if I've told them about 3 or 4 times to do and they haven't done it.
I: And what happens at the end?
P: Usually by the time I'm halfway through they are off doing it. Most times they are.

Another parent: When it comes to the calendar she crosses off the days and especially the birthdays. So she can count how many sleeps it is until Aunty Jane's birthday or something like that.... It's quite surprising. I think it was about 28 sleeps one day until her birthday and then next morning, I never said anything about it and she said "It's 27 sleeps now". She'd remembered from the day before, one sleep less and that was that.

5. Patterns (P)

Patterns repeated for their own sake
- block building
- painting, drawing

Todd takes a piece of wood out of the wood box by the carpentry table, chooses four matching blue plastic lids, and hammers them onto the wood in a symetrical pattern.

6. Orderliness (O)

Checking that things are in order, that they fit
- that they are in the place or space allotted to them
- putting shapes together to form a whole (eg, jigsaws, putting 2 halves of an apple together to make a complete apple)
- matching 1:1
- sorting (e.g. putting blocks away)

John runs outside with an egg carton, and crouches over it, collecting stones from the edge of the path. Amy comes over.
A: Do you need leaves?
J: No.
John carefully places one stone in each compartment of the egg carton, closes the carton, and runs back inside to put it in his locker.

Fiona is putting together a puzzle.
Adult Let's have a look. How are you getting on?
Fiona One more piece missing from this
Adult Yes, I wonder where it's gone. Never mind.

7. Literacy (L)

Reading or writing any numbers, including numerals or number words
- using numbers as labels

Making a birthday hat
Teacher: Do you want me to do a five or would you like to do a five?
C1: You do a five
C2: I can do a five and a six

Looking at the numerals on the toilets
C1: That's number one. You're number two.
C2: And this one's four.
C3: Mine's number three.
c1: I've been in number one. I've been in number one.

### 8. Talk about Number for its own sake (N)

Parent: What's your name?
C1: Amanda
C2: My name's Kylie
C3: Another Amanda eh? Two Amandas. We've got two Amandas, four Amandas, we've got six Amandas
Parent: Billy, have your turn otherwise let Amanda have a turn because she wants to have a turn. O.K, let's go. What are we doing here.

### 9. Exploring Quantity to Solve a Particular Problem (Q)

Manipulating physical quantity (eg, sand, water, dough) or discrete quantities (eg, blocks, beads, buttons, counters) where the child appears to be trying to solve particular problem

Peter is making a car at the carpentry table. His mother is present, helping his younger brother. Peter is holding two round bits of wood in his hand, searches in the carpentry trolley.

P: I need four wheels but there seems to be not four wheels
(Looks in the wood box)
Mummy I need four wheels but there isn't.
M: (gestures to the trolley) I can see some here.
(Peter finds two more, stacks them up beside his piece of wood and proceeds to nail them on)

C1 and C2 are in the sand-pit. The hose is running, and a group of children have dug a tunnel.

C1 Hey, I know what we can make. [See the] water under there
C2 Yeah
C1 Puddle. See that big puddle .. you can make it .. dig deep and see if it gets wider.
C2 Let's do a bigger tunnel. Let's do some water in there.
C1 Let's get some more water

### 10. Exploring Quantity for Other Purposes (M)

There are two reasons why this framework may be useful:

(i) **In order to find out if we are speaking the same 'number language'.**
Sometimes in a conversation using number, children will be literally at 'cross purposes':
Elizabeth and Matthew are counting the number of children sitting on chairs in the front of the mat

E: (pointing twice to one child) 1-2-3-4-5-6
M: No, there's 1-2-3-4-5
E: 1-2-3-4-5
M: 5. We counted. Because you went 1-2-3-4 (illustrating how Elizabeth double-counted) and there's 1-2-3-4-5 (pointing once to each child)
E: 5-6-7-8-9

Peter and Elizabeth are having morning tea

P: I'm going to count the children (pointing one to each child, pointing to K. on the count of two) 1-2-3-4-5-6
E: I'm four

(ii) **In order to make links between the purposes and number knowledge.**

The data may begin to make sense to a practitioner if we look closely at two children, with the above framework in mind.

Elizabeth

Elizabeth sees number as poetry. Her major reason for using number is for the purpose of rote counting, and for status (ages and birthdays). She is an enthusiastic rote counter, and does not appear to be interested in using number for counting things or to find out 'how many'. Elizabeth is in a sense one of Gardner's 'dramatists (see Gardner & Wolf, 1983): her family play is complex. Her interest in stable rote 'number' sequences extends to the use of 'eenie meenie minie mo', and she is very interested in repeated refrains in a story (a train book had a recurring line 'It was very dark in the tunnel' and she repeated it with relish after only the second hearing); it perhaps reflects an interest in and a facility with oral rhythm and pattern.

### Todd

Todd is a pattern maker. He doesn't use number very often, but he uses maths for a wider range of purposes than does Elizabeth (eg, patterns, problem solving with blocks, keeping score at badminton). He enjoys drawing multiple copies of a particular object (eg, triangles, squares, aeroplanes, cars) and then cutting them out and rearranging them. He makes patterns also with shapes, and in carpentry. His rote-counting skills are much less sure, but with activities that keep the numbers small (i.e. are accessible), he can use number in problem-solving activities.

## CONTEXTS

The above literature on mathematical understanding suggests that the context is important: we need a three-dimensional array to portray the complexity of early mathematics. In the context of a birthday party a child may readily perceive that there are five candles on the birthday cake and this means you are 'big' enough to go to school, but in the context of a game of Snakes and Ladders she or he may not readily perceive that there are five dots on the dice and that means that you move forward five squares. Sinclair (1990) refers to number as an 'object-of-thought' as being what one can do with numbers.

## DIFFERENCES IN THE PURPOSES FOR WHICH NUMBER IS USED

Preliminary findings suggest that each kindergarten promotes its own pattern of mathematical purposes (just as every home does), and that within each environment children will draw on their personal experiences and interests to create their own individual patterns. In each kindergarten eight children were observed, four who were categorised as 'number experts' (their score on the Number Tasks Interview was at least 35), and four who were categorised as 'number novices' (their score on the Number Tasks Interview was 10 or less). Maths-related talk and activity was coded according to its social purpose.

Initial interpretation of the data suggests that the 'novices' used number as pattern more often than the 'experts', whereas the 'experts' used number to check that things were in order, or to solve particular problems using quantity.

Below are some examples of these purposes from the observation notes and transcripts:

### Pattern

Fiona: Placing 'biscuit' shapes of dough in an array in a cardboard box
Matthew: collecting bottle tops and decorating hat in a symmetrical pattern
Todd: Drawing repeated squares and triangles , hammering 4 lids on piece of wood in a symmetrical pattern
Malcolm: A symmetrical pattern painting with dye on paper
Elizabeth: A symmetrical border painting

### Orderliness

John: Fits sandcastle container carefully back over the castle , pushes dough into shape, collecting stones and leaves to put into each compartment in an egg carton
Fiona: Finding pairs in memory game
Matthew: Looking for matching pictures
Bridget: Divides mandarin carefully in half, eats one half
Fiona: Putting jigsaw pieces into a frame, as part of a competitive game

### Exploring Quantity to Solve a Particular Problem

John: painting with two brushes cellotaping three egg cartons together, takes two pieces of card to make a hat, uses four crayons at the same time to draw.
Stuart: building enclosure for mice from blocks, adding and removing boxes, counting escaped mice.
Todd: Making an enclosure with four half-blocks, building a roof on top.
Fiona: Counting legs on picture of bee (requested by adult), counting stack of paired cards to see who has the most (requested by adult ).

## MEANINGFUL ACTIVITIES

Children create their own opportunities to count (chairs, children, sandwiches). The kindergarten programme also provides opportunities. For example, finding out how many scissors, staplers, hammers, spades, blocks, spoonfuls of flour, and moves on the snakes and ladders board, are all important purposes for using number which are embedded in the programme.

During the later part of the research, researchers and teachers tried out activities at the kindergartens. These activities were designed to fit in with the ongoing programme, and to connect with what had been found from observations and parent interviews to be relevant purposes, contexts, and levels of difficulty. The following table shows the links between the activities which were introduced and the purposes for which quantity could have been used in those activities. The contexts of these activities were designed to match the children's interests: Stories about supermarket shopping, cars, trains, sharing food were used; teachers wrote songs, and introduced number to discussions about trips etc. Activities went outside.

Purposes for which Quantity could be used

| | R | S | E | T | P | O | L | N | Q | M |
|---|---|---|---|---|---|---|---|---|---|---|
| Shopping Book | | X | | | | | X | | X | |
| Train Book | | | | | | X | X | | X | |
| Biscuits Story | | | X | | | X | X | | X | |
| Book & Numerals | | | | | | X | X | | X | |
| Dinosaurs | | | | | | X | | | X | |
| Pegs & Boards | | X | X | | X | X | | | X | X |
| Nail Dispensing | | | | | | | | | X | |
| Food (Family corner) | | | X | | | X | | | X | X |
| Pegs & Washing | | | | | | X | | | X | X |
| Games Kit | | X | X | | | | X | | X | |
| Teacher Games | | X | X | | | | | | X | |
| Card Games | | | X | | | X | X | | X | X |
| Fishing Game | | X | X | | | | | | X | X |
| Skittles | | X | X | | | | | | X | |
| Spin & Jump | | | | | | | | | X | |
| Tug of War | | | X | | | | | | X | |
| Songs & Rhymes | X | | | | | | | | | |
| Numeral Labels | | | | | | | X | | | |

Some children are able to use numbers higher than five with ease but many four-year-olds, even if they are using maths for a wide range of purposes, are not accurate when they enumerate more than three objects. Sometimes the rote-counting sequence is very practised, and the number words come out faster than the counting finger can tag the objects. One of the researchers was sitting on the floor with two children and a magnetic story about a train losing its carriages in a tunnel. The children were counting the carriages. Jodie was using her finger to point to the carriages as she counted, and frequently double counting. Her list of counting words raced ahead of her finger. Suddenly she said "I know. I'll count with my foot!" She held onto her foot with her hand and 'pointed' with the big toe, to count accurately up to ten.

Some of the activities that the teachers and the researchers introduced addressed some of the issue of difficulty level. For example, interactive activities were used (pegs in a peg board, magnetic pictures, pegs on a 'line',to slow the counting down and keep a sensori-motor link); putting counting opportunities into areas of gross motor activity: e.g. jumping; keeping the numbers small (dice that only go to three, spinners to four); playing games where everyone has a dice or a spinner (they don't need to take turns); keeping games simple (e.g. a snakes and ladders board where the direction of the track is clear, the number of spaces on the track is not too great (the game doesn't take too long), and the snakes are short; and devising cooperative activities.

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# CHILDREN and COMPUTERS

*Joanna Curzon, Special Education Service, Otago*

"Infants and toddlers learn through their own experience, trial and error, repetition, imitation, and identification. Adults guide and encourage this learning by ensuring that the environment is safe and emotionally supportive. An appropriate programme for children ... invites play, active exploration, and movement. It provides a broad array of stimulating experiences within a reliable framework of routines and protection from excessive stress. Relationships with people are emphasized as an essential contribution to the quality of children's experiences." (Sue Bredekamp, *Developmentally Appropriate Practice* - National Association for the Education of Young Children)

"Children learn when they are actively engaged in finding solutions .... They learn by doing and they learn by doing things with other people". (Alison Dewsbury, *Using a Computer as a Tool in Early Literacy* - Paper given at CES Conference - Kids, Classrooms, and Computers - Wellington, 1991)

There is considerable debate on the use of computers with young children, including those with special educational needs. Concerns often expressed are:-

- Are computers developmentally appropriate for young children? - especially - can they work with symbols?
- Can they master the physical access to the computer? - especially - can they learn to handle disks and use the keyboard?
- Will the introduction of a computer reduce the time spent in other play activities? Will the children become addicted?
- Is there any danger in introducing computers to very young children?
- What about equity issues?
- Will the use of a computer stifle playful social interaction?
- Will the use of a computer lead to isolation of the child?
- Will the use of a computer as a drawing and writing tool mean a failure to learn to use other, traditional, methods?

A few answers emerge from studies of the use of the computer with young children.

- Children already use symbolic play to a considerable extent - think of gesture and communication. If they are allowed to choose activities for themselves, they will do so at their own level.

- There is no evidence that the introduction of a computer reduces time spent in other play activities.
- No major differences have been found between the way computers are used by younger and older pre-schoolers. However, there is evidence that early introduction to young children with special needs is particularly useful in order to give them a means of control over their lives which is often otherwise denied them by virtue of their disability. Appropriate use and intervention at this early stage helps to avoid the learned helplessness which is otherwise so often a feature.
- Girls and boys do not differ in the amount or time of computer use
- Young children prefer social use of computers and rarely work alone
- Computers may stimulate social interaction more than noncomputer activities - they may facilitate interactive problem-solving (Fein)
- The support of an adult is important - children are more attentive, more interested, and less frustrated when an adult is present (Binder and Ledger; Shade)
- Pre-scholers' language activity, measured as words spoken per minute, was almost twice as high at the computer as at any of the other activities
- Skills acquired at the computer transfer across to other settings

Clements: Computers and Young Children:
A Review of Research (*Young Children, Nov '87*)

Just as we would all agree that children learn through using developmentally appropriate play resources, so they require developmentally appropriate computer resources. This means appropriate software and appropriate input devices.

As demonstrated by the review of the research, children learn best through working in a group, with clearly-defined structure, roles and support. They spontaneously and effectively teach and help one another - time and again, the comment is made about the quality and quantity of the social interactions around the computer. Teachers comment that the expected aggression and impatience while awaiting their turns does not materialise.

Using the computer, children can:

"- take control of their learning - planning, problem-solving, making decisions and constructing meaning;

- tackle open-ended problems using common sense and current understanding and skills;

- interact with others using the computer as a focus;

- achieve sound educational objectives;

- exploit the unique attributes of the computer such as:

    - giving an instantaneous response;
    - providing motivation and a constant focus for attention ...........

- achieve things which they would not normally be able to do by themselves (for instance, produce a printed text before they can write);" (Alison Dewsbury, *Can Computers Change Classrooms for Kids?* - as above)

- access alternative learning experiences - such as simulations

The effectiveness of the use of the computer depends critically on the quality of the software, the amount of time it is used, and the way in which it is used. Good software provides children with the opportunity to exercise:

* challenge
* control
* curiosity
* fantasy

What can we expect the benefits of this newest resource to be? Computers enable children to explore and experiment, in a non-judgemental, supportive environment. Good software allows only for trial and error, not failure. Appropriate use of technology empowers the child and allows their creativity and problem-solving skills to flourish.

The use of a computer CAN NEVER replace the teacher, parent, or support person - rather are they vital to the successful and fulfilling use of this resource as any other. It is also of vital importance to reinforce the use of the computer through the related use of other resources - for example, to explore the concepts of movement and direction through manipulating characters on the screen, real objects on the floor, and the child's own bodily movements through space. "The key is providing developmentally appropriate software, then reinforcing the software with concrete activities" (Davidson - *Children and Computers together in the Classroom* - 1989)

# Creating Workable Environments For Children Under Three

Linda Harrison

First, let me say how pleased I am to be offering this presentation on learning environments for children. I have a particular interest in the contribution that the classroom environment can have both on staff well-being and teaching styles, and on children's learning, and I look forward to sharing and discussing these ideas with you (1).

This workshop is designed for practising teachers; that is, people who spend a significant amount of time working with young children in an educational setting, or who have access to and are involved in a number of such settings. In writing this, I am acutely aware of the great diversity in the early childhood field and the wide range of settings that may be represented by participants. Your teaching environment may be a permanent classroom, or rooms, in a child care centre or preschool, or it may be a transient and portable fixture such as provided by a mobile centre, an occasional care centre or a playgroup operating out of a community hall. Your workplace may include settings which are in other people's homes, if you are employed with a Family Day Care scheme, or you may work in other people's classrooms, if you are a Special Needs Worker, an Early Childhood Adviser or a TAFE/University lecturer. Within these settings, you may have a great deal of autonomy in determining how the learning environment is prepared, or your decisions about this may need to be made through negotiations with other staff members, supervisors or parents. My aim, then, is to accommodate all these possibilities, as each participant will bring to the workshop their own teaching experiences gained in particular work environments. I hope that each of you will consider aspects of the early childhood learning environment by working through and discussing the context of your own, or a familiar teaching situation, and that as a result, you will come to some new understanding of how the environment can be structured to contribute positively to children's learning.

First we need to define what is meant by the term 'the learning environment'? Jim Greenman has argued that the environment

> *includes 'all the external conditions and factors potentially capable of influencing an organism' - how time is structured and roles assigned, expectations of our behaviour, and physical surroundings* (Greenman, 1977:17).

From this perspective, we can define the specifics of the learning environment in terms of the three main criteria:

**time** - the daily schedules and routines;

**social roles** - expectations of staff, staff-child interaction, peer interaction;

**physical space** - room size, layout of equipment, organisation of materials.

These are the basic components which make up the overall nature of the teaching/learning and working environment, and the details of which can be analyzed to determine the quality of that environment.

Taking a different perspective, the learning environment has been defined as the climate or atmosphere that is created in the early childhood centre. Frederick and Margery Ebbeck have written that -

> *An atmosphere is an environment which has a 'feeling' about it - the kind of thing you sense and know you either like or dislike it. Children very quickly sense the atmosphere of a school and classroom, and seem to know very early whether or not they are happy to be part of it. This colours their reaction to and interaction with the environment.*
>
> (Ebbeck & Ebbeck, 1975:25)

We know that adults certainly respond to the atmosphere in the classroom, and both staff and parents could, if asked, identify things they like and dislike about their early childhood environment. Making a list of these likes and dislikes is a good way to start in any consideration, evaluation, and improvement of your own teaching/learning setting. Staff will suggest many preferences for their work environment; for example, good relationships with other staff, flexible timetables, less moving of furniture, more storage space, fewer tables,

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coordinated colour schemes instead of red, blue, white and green tables and chairs, comfortable adult-sized chairs, darker rooms at sleeptime, time for group relaxation, etc. All such ideas can be looked at and discussed in determining ways to create environment which work for staff.

The question of what children like and dislike about their child care environment is more difficult to answer, however, especially with under-three-year-olds. In our work with older children we have seen a very clear awareness of home and school environments. Six, seven and eight-year-olds can describe with great accuracy environments which they enjoy or dislike, and can present wonderful alternatives through drawing or construction materials. The following ideas, for example, came from a discussion about L's classroom:

> *Well, it was very dull - there's no colours, no pictures you could see...I'd make a reading corner. Bright sheets on poles to make a tent with cushions in it to be cosy. I'd paint the room in bright colours like yellow and pink - they make you happy. The reading corner would give you somewhere to be by yourself sometimes.*

Preschoolers can also give us an understanding of what their environment is like for them. A group of four-year-olds were asked to talk about and draw a picture of their favourite place at home. The responses referred to feelings of warmth and security ("My bed..I like sleeping in it"; "I like my mummy and daddy's room, because they've got a really warm bed, I go in the morning"), of close relationships with adults and siblings ("My best room is Daddy's room. He plays games with me"; "The kitchen is the best room. Mummy and I cook together"), of personal space belongings ("my bedroom, because I've got micromachines, I got a plane, helicopter"; "my bedroom, and my toy box, my bed and me in it at night"), and of personal choice and control in what they do ("outside, because there are swings, happy"; "in my bedroom, I play with Barbies"; "under my bed, nice and comfortable, I hide from my mum"). Similarly, children who were asked about their favourite place at preschool described the environment and what they like to do there in terms of security, adult company, friendship, personal freedom and choice, activity and physical challenges. Children welcome the responsibility of organising their learning environments, and if given the chance to rearrange the indoor or outdoor setting show definite preferences for the arrangement of space and equipment. These examples tell us that in creating workable teaching/learning environments for young children and the staff who care for them, we need to constantly look to the users of that space and design settings to suit their needs.

) and

When working with children under the age of three, we must be aware that they have preferences for social and spatial components of the environment, which in many cases are even more paramount than with older children. With this age group we are constantly seeing the need for security, warmth, comfort and contact with adult carers. We also know that this is a time when children are striving for independence, autonomy and a strong sense of self. They are setting themselves many challenges and need to be able to achieve these with encouragement and success. An environment which is "workable" is one which recognises these needs and provides opportunities for children's developing skills. The needs of the under-three's can be summarised under two headings:

**consistency**, which provides security, an understandable world, recognisable and maintained limits, and develops trust, confidence and self-control, and

**challenge**, through which they assert their independence, master physical skills, develop autonomy, and move into an extended social and cognitive world.

Learning environments which are appropriate and work well for young children are those which recognise the delicate balance that exists between these two determining facets of children's developing personalities.

First we will discuss ways in which consistency can be provided in the learning environment. Consistency for young children can be achieved by providing stable, reliable relationships with caregivers, and a physical environment which is regular, dependable and comfortable. Children need to feel that at child care they are in a **familiar space**, a place not unlike the everyday quality of a home setting. It should have the same comfort, interest, security, and intrigue. It should have the same open spaces and hideaway places, the same changes in floor surfaces, the same sort of furniture to hang on to, crawl into, and climb on, and it must be safe. An environment which is **comfortable** for young children and allows them to climb in and over structures, sit on a lap, or curl up in a cushion, also provides consistency. As Greenman has pointed out,

> *a soft, responsive, physical environment reaches out to children. It helps children to feel more secure, enabling them to venture out and explore the world. Most importantly, it allows children to make their presence felt, to leave an imprint on the world*
> (Greenman, 1988:74).

Consistency is achieved in an environment which is **regular and predictable**. The child care setting should provide defined areas for certain activities and certain types of play. Active play areas should be clearly separated from quiet areas, table activities from floor play, climbing areas from dramatic play settings. As much as possible, these areas should be permanent, allowing the child to learn through familiarity and repetition where to go for jumping, or for storytime, or for block building. A young child learns from an environment which has a clear sense of order. Children can learn the rules and the structure of the centre through repeated explanation and through actively doing. Children should also be invited to help maintain this order, and to understand it. Putting away toys is a major part of the child care day, and staff should try to slow down the process to give enough time for children to become involved. This can be helped by storing equipment in clearly labelled containers which identify where items are to be packed away. In this way children learn that careful replacement is as meaningful as selecting and using the equipment or materials.

Second, we need to consider how the environment can be set up to respond to the child's need for **challenge**. The child care environment for the under-three's must recognise the "two steps forward, one step back" mode by which infants and toddlers learn about the world and practise their development skills. The best teaching/learning environment is one which is flexible and responsive to the individual's need to push forward and retreat; it is a setting where children can seek out their own challenges. Appropriate challenges for children under three can be classified in terms of developmental areas.

**Cognitively**, children need novelty, change, stimulating and interesting items to explore, look at, and manipulate. They need items which respond to them, which help teach about cause and effect, and their own ability to make things happen. The environment should develop children's understanding of themselves and their world, by presenting familiar realistic objects for active learning.

**Physically**, children need the opportunity for mastery and extension of the many skills of movement and the development of body awareness. Equipment such as climbers, tunnels, pits, slopes, stairs, surfaces at varying levels, push-pull toys, blocks to carry and dump, all provide appropriate challenges for the rapidly growing child. Most important, these need to be available to children both indoors and out, and at most times of the day. Children set themselves physical challenges which are all-consuming and immediate, and will take whatever opportunity there is to climb up things - be it bookshelves, tables or whatever. Climbing equipment is an essential requirement for meeting the physical needs of children under three.

**Emotionally**, a stimulating and challenging environment, where children are free to make choices, will encourage independence, autonomy, decision-making and self-control. Staff must, however, recognise what are appropriate and reasonable levels of choice for the under-threes. A too limited range of activities or equipment will result in boredom and frustration. Too great a choice, on the other hand, can offer too many distractions and result in little concentrated effort, with children rushing from one area to the next. In setting up the child care environment, staff should aim to provide an interesting selection of items, which meet the wide range of children's developing skills, and which are accessible, arranged logically and changed regularly. As Jim Greenman has stated,

> *the play environment should be developed as a wonderful, interesting place that continually captures a child's attention and is laid out to ensure individual and group experiences*
>
> (Greenman, 1988:54).

**Socially**, infants and toddlers are facing the challenges of learning to share and interact with peers in socially acceptable ways. In planning for successful group experiences in the under-three's area, staff need to consider the egocentric nature of this age group. Small play spaces, rather than large undefined areas can encourage positive interaction between groups of two or three children. Providing duplicates or triplicates of items can avoid arguments and disputes over who is to have a favourite toy. Conflict is not a suitable challenge for the under-threes.

In summary, when working with children under three we need to aim to provide new and appropriate challenges for children within a secure, ordered and structured environment. As stated by Elizabeth Dimond, a consistent, predictable, yet challenging environment allows children to move forward towards "increasing diversity, change and non-predictability, and then back again". This "interplay of regression and growth", she states, is vital to the child's autonomy and independence (Dimond, 1979:27,28). Within a familiar, almost rigid framework of defined play areas there is the opportunity for novelty, stimulation and challenge. The overall structure and layout of the environment should be relatively unchanging, but the activities, props, songs, stories and materials can be varied regularly to provide a breadth of learning experiences appropriate to the young child. In designing such an environment, the following points should be considered:

1. **Include all necessary components of an appropriate learning environment** - areas which should always be available include space and equipment for active physical play such as climbing, jumping, crawling, sliding, etc., for manipulative play and problem solving, for creative, messy activities, for dress-ups and dramatic pay, for quiet activities such as singing and stories, for privacy and seclusion, and for routine care needs. In addition, a curiosity corner, with items to explore, investigate and discuss should be provided regularly.

2. **Decide on fixed locations for different learning areas** - design a layout for play which accommodates the required learning areas and makes best use of the existing facilities; in

doing this, staff should separate incompatible areas such as active, noisy play from quiet, cosy activities, and should consider architectural features such as access to water, doors and path ways.

3. **Make clear definitions between different learning areas** - a range of items can be used to define and separate play spaces; consider how you can use cupboards, bookshelves and other classroom furniture, distinctive floor mats, platforms, and curtains. Fences or moveable wooden dividers can also be fixed to fit between pillars or walls in the room. These are also useful for defining outdoor areas, such as verandah space.

4. **Provide different sized areas** - the size of the space should vary according to usage patterns; for example, climbing equipment needs a large space, but book corners can be small and private.

5. **Be creative in designing uses for every possible space** - all floor space should be made available to the children to maximise play areas and minimise "no go" areas which require constant adult supervision; more floor space can be created by constructing platforms which allow "climbing up and crawling under"; ceilings and rafters can be used to hang swings; seats for mealtimes can be attached to tables and hung on the walls when not in use.

6. **Create a visually appealing atmosphere** - use photos, pictures and displays, placing these at a level appropriate to toddlers and covering them with contact to protect them; create a homelike atmosphere with plants and other beautiful things; lower the ceiling with materials or hanging items such as branches, umbrellas, mobiles, etc.

7. **Include comfortable, relaxing areas for both children and staff** - the use of mattresses and/or pillows helps create softness and cosiness; some adult-sized furniture such as armchairs or a sofa can create a homelike atmosphere and offer an inviting place for staff and children to interact in comfort.

8. **Provide a realistic choice of play equipment on low, open shelves** - toys should be readily accessible to the children, but kept in clearly marked areas or containers to encourage children to replace items after use and help with packing away.

9. **Provide additional storage in areas which are easily accessible for staff, yet out of children's way** - shelving placed above play areas allows for easy provision, removal or change of equipment by staff. This avoids the problems of too much equipment for children, equipment that never changes, and long treks back and forth to distant store rooms for staff.

In conclusion, a well-planned child care setting can provide choice and stability for a range of children's needs and interests, as well as a comfortable, workable environment for staff.

Notes:

1. The material for this workshop is based on the ideas presented in my AECA Resource Booklet "Planning Appropriate Learning Environment for Children Under Three" (January 1990) and external teaching materials on Learning Environments for Early Childhood which I have prepared for the B.Ed. (Early Childhood) offered at Charles Sturt University-Mitchell.

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# GENDER EQUITY: THE STATE OF PLAY IN EARLY CHILDHOOD SERVICES

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## INTRODUCTION

The many issues concerning gender and equity in education have been brought to our attention since the early 1970's. The disadvantages of sexism within society, and within education has been widely documented in Australia and overseas. The differing outcomes of the education process for girls and boys have also been clearly stated and confirmed by research (Commonwealth Schools Commission, 1987). However, most of this literature focuses on secondary education with some emphasis on primary education. The implications of sexism and sex-role stereotyping in early childhood education has been underrated by many researchers (Bruce, 1985). Perhaps this is primarily because other researchers may lack the understanding and knowledge that we have of the influence of early childhood education in the establishment of foundations for children's development and their future success in the learning system. Or is it that there is a perception that gender inequities don't exist in educational services for children who are under school age?

It was in this context that I undertook a qualitative study of five early childhood services in Sydney. The study involved questionnaires to staff and parents and the collection of observational data of actual behaviours within these centres.

## AIMS OF THE STUDY

While this study was essentially an exploratory one, the aims of the study were to:

- *review literature concerning sex-role development of young children and gender equity issues in early childhood education;*
- *to investigate the levels of awareness of gender equity issues within a small group of early childhood services;*
- *to collect data on current practices/behaviours in relation to gender equity in those services;*
- *to investigate the activity and peer preferences of young children in these services*
- *to investigate the level of sex-stereotyped play in these services;*
- *to assess if there is consensus or a mismatch between awareness, perceived behaviour and what was actually occurring.*

## REVIEW OF LITERATURE

Sex-roles are learned as part of the socialisation process and stereotypic sex-roles can be a product of this process. Earlier theorists believed that sex-roles were the natural correlates of biological and physiological sex differences, and thus they became endemic in traditional child rearing practices and sex-role stereotyping. More recent theorists have examined the role of parents and other socialising agents such as teachers and peers in children's sex-role development.

Social Learning theory and Cognitive Developmental theory (while differing in the focus and degree) agree that children acquire concepts about their sex role by observing others. From these observations children associate certain patterns of behaviour to be female/male appropriate. Children's behaviour preferences are then based on what they perceive is appropriate for their own sex.

Bandura (1985) adapted the Social Learning theory to a Social-Cognitive learning approach, postulating that observational learning is affected by cognitive processes. That is, when the child is exposed to a model, the outcome in behaviour from the observation depends on the child's skills in attending, in the retention of the information observed, their ability to reproduce modelled events and the degree of motivation required to model the behaviour. Bussey (1983) and Huston (1983) also attribute social cognition for the development of sex-roles, as children process and discern information from the behaviour of many models, in a variety of situations and frequency of behaviours, over a period of time.

While it has been established that by the age of 3 years children have acquired a gender identity (Kohlberg, 1966; Bussey, 1983 and Huston, 1983) and can label others, gender constancy (i.e. that their gender identity will remain invariant) may not be fully developed for several more years. Studies undertaken by Bussey (1983) have also concluded that children in this age group learn behaviours considered to be appropriate to their sex and the opposite sex before they are able to put the reasons for their behaviour into words.

Many studies have been conducted to determine the origin of children's toy and activity preferences (Connor & Servin, 1977; Rubin, Watson & Jambor, 1978; Eisenberg, Murray & Hite, 1982; Perry, White & Perry, 1984 and Lloyd & Smith, 1985). While these studies concluded that children do prefer same-sex appropriate toys/activities, the explanations of why have not been conclusive. The study by Eisenberg, Murray & Hite (1982) however, did conclude that children used virtually no sex-role reasoning to justify their actual preference. However, their reasons related to what the toy could do or if the toy/activity was associated with objects or people that the child valued.

Therefore, if children do model behaviours (having the cognitive skills and motivation to do so) that are seen to be valued by people who are important to the child, it is essential that children are exposed to several, consistent and long term models who display non-stereotypic behaviours. Where the adult is also an active model, children's participation in that activity is increased, with a greater impact for girls if the model is female (Serbin, Connor & Citron, 1981 and Huston, 1983). Children's self-esteem can be heightened if it has a broad base developed from a range of skills and competencies that are expanding rather than being limited.

## METHODOLOGY

### *The Settings*:

The observational study was undertaken with children aged between 3 - 5 years in pre-school and long day care settings, as this age group is the most suitable to observe across both settings. Centres were selected within and across geographical areas of Sydney. The five centres used were in the inner city, lower north shore and western areas. Four centres were visited six times and one centre received five visits. The same group of children being observed each time. With the exception of one group, there were approximately the same number of girls as boys in the groups observed.These visits took place between late March and early July, 1989. Only regular staff were observed and no recorded data was taken that involved students and casual relief staff. At the conclusion of these visits, staff and parents were asked to complete a questionnaire.

### *The Observations - The First Three Visits*:

Observations were taken of the naturally occurring interactions between adult/child and between peers. These interactive behaviours were identified and coded.

On each visit the reporter spent between 1½ - 2 hours at the centre. Observations were recorded on the following inventories:

- *indoor activities*
- *outdoor activities*
- *adult/child interactions*
- *mode of dress of staff/children*

For each inventory, an observation check list code was developed to define the criteria used. Criteria for the indoor/outdoor checklists were recorded alphabetically. Each area was then observed for a five minute period on a systematic basis. One visit entailed an order of observing areas from top to bottom (on the checklist), another visit entailed observing the order from bottom to top, and for the third visit, areas were selected at random before arrival at the centre.

### *The Observations - The Second Three Visits*:

While the inventory checklists were useful in highlighting aspects of children's play and their interactions with each other and adults, the reporter found them limiting in determining the salience and quality of the play and interactions that were being observed. Therefore, for the final three visits, the reporter used time sampling, point sampling and anecdotal observation techniques to collect data.

As with the initial visits, approximately 1½ - 2 hours was spent at the centre. The reporter however, remained in a given area for as long as the play/interaction was deemed valuable to record for the purposes of the study.

*Purpose of Questionnaire:*

The purpose of the parent questionnaire was to determine if parents' attitude towards sex-role stereotyping may be an influence on children's behaviour in terms of which behaviours may be supported and encouraged or discouraged and what goals they may have for their children. The purpose or area of analysis was masked by the reporter in the questions that were asked.

The purpose of the staff questionnaire was to examine how staff see the children's involvement with themselves and each other in terms of sex-role stereotyping, their awareness of and interest in gender equity issues and if this then indicated a mismatch of intentions and actual behaviour observed. Staff were informed of the purpose of the study when the questionnaires were given out and thus the purpose of their questionnaire was not masked.

## RESULTS

Data from this study indicated that sex-role stereotypes are a significant feature of children's behaviour in some early childhood settings and these stereotypes are often "unconsciously" supported by the adults in these settings.

*The Observations:*

Boys and girls were involved in curriculum areas (activity preferences) that are traditionally accepted as being appropriate/liked by children of a particular sex. Marked differences were seen in the level of participation of boys and girls in the areas of blocks, climbing, dramatic play, manipulative equipment, painting, puzzles, sand play, woodwork and family corner (see Table 1). When girls and boys were together in an area, their play was categorised as being 50% parallel, 41% was co-operative and 9% was solitary. Curriculum areas where the greatest numbers of co-operative interactions occurred were dramatic play, sand and family corner areas. The single, dominant curriculum area in which adults spent their time with children was art/craft (other than easel painting). Substantial periods were also spent in the manipulative equipment and sand play areas. Adults spent the least amount of time with children during free play activities, in the water play, painting and book areas.

The results of the adult/child interactions for both verbal and physical interactions were interesting.
Of all adult interactions, 57% were with boys and 43% were with girls. Boys received more of the adults attention to their extension of language and knowledge, use of open-ended questions, direct involvement in their play, attention to inappropriate behaviour and behaviour expectations. In no area of verbal interaction did the girls rate higher, except for adults' use of closed questions to them. Both girls and boys received the same level of interaction involving holding/cuddling and smiling/laughing with the adult. (See Table 2). A summary of all the anecdotes and time samples taken during the study indicated that 73% of these involved children/or adults in stereotypic behaviour and only 27% involved non-stereotypic behaviour, which should be of concern.

*The Questionnaire - Parents*:

The response rate from each centre varied between 21% - 62%.

The vast majority of returns of the parent questionnaire were completed by the female parent. Parents indicated that their boys enjoyed books/stories and music/singing as activities at the centre. Play with other children and outdoor activities were also significant. Girls preferences were indicated as painting, art/craft, as well as books/stories and outside play. Dress-up activities and play with adults were indicated for girls but not at all for boys. These comments are interesting in view of the actual observed behaviour of boys. (See Table 1).

Parents indicated strongly that the most important attributes for their child, at this point in time are to be interested in learning and secure in their environment. The least important attributes included the ability to speak another language, ability to read and write some words and to enjoy maths/science.

Attributes for their child in the future included the ability to speak another language, ability to problem solve, enjoy maths and science and to be independent and self-disciplined. The major gains for their child attending the centre were the opportunities to interact with peers and as a preparation for school.

*The Questionnaire - Staff*:

The response rate from each centre varied between 50% - 90%.

The results of the staff questionnaires indicated that 63% were often actively involved with girls in non-stereotypic areas of play and 56% indicated they were often actively involved with boys in non-stereotypic areas. 50% indicated that girls were often actively involved in using manipulative equipment and 75% indicated that boys were often involved in reading books. The two main areas that staff indicated girls were good at/enjoyed were dramatic play and drawing, and for boys they were manipulative equipment and blocks.

When describing the play of boys and girls together, 69% described it as co-operative. The dominant themes of play for boys in the block corner were roads and buildings/cities. For girls, the themes were houses and shops. Girls and boys both took on the respective roles of mother and father and were also equally involved in cooking in the family corner. Boys were not indicated to be involved in play about shops/shopping as were girls, and girls were not indicated to be involved in play about going to work, as were boys.

## DISCUSSION

A boy and a girl were climbing into a tree *"Ha! Ha! I'm higher than you; I am strong, I am clever"* chants the girl.

This anecdote was significant - girls are becoming assertive and taking on non-stereotypic roles. Let's continue the observation ...

*"I am clever (a pause) I am sexy, I am sexy"* the girl begins to chant with a big smile and a wriggle as she does so. The adult asks *"What does that mean?"* She replies: *"It means you get dressed up and look cute."*

**Adult:** *"Who told you that?"*

**Girl:** *"Oh, I did ... and my grandpa."*

Enter the stereotype!

This anecdote typifies the results of the study. Early impressions were that girls were involved in less stereotyped play activities. They were seen in the block corner, sand play, woodwork, climbing, maths areas, etc. Boys were also observed to be in art/craft, family corner and dramatic play activities. Girls and boys were involved in co-operative play with each other. Adults were interacting with children in these areas, and physical affection and nurturance were shared.

On closer observation however, the quality of the play and the interactions were a disappointment to the earlier impressions. The findings highlighted that adults give more attention to boys than girls and that the quality of interactions is better for boys and that boys receive better teaching instruction than girls. The findings highlighted that while girls were participating in more non-stereotypic play, again the quality of their participation and outcome was poorer than for boys in the same areas. While there were numerous co-operative play situations involving boys and girls, the boys were pre-dominantly the leaders and directors of the play.

## CHILDREN'S ACTIVITY PREFERENCES

Children's activity preferences have not substantially altered from those indicated by Connor and Serbin in 1977 and by Ebbeck in 1985. The most significant curriculum areas for boys are still blocks, construction (manipulative) and sand play. It is these curriculum areas that the Commonwealth Schools Commission (1987) reported as providing opportunities for spatial and mathematical skills, which have also been identified as the skills that girls are not interested or proficient in.

Ebbeck's study (1985) noted that boys participated less in dramatic play than did girls. This study showed a substantial difference in that the boys were dominant in this form of play. "Superhero" play was a consistent theme of dramatic play for boys in all centres. It is positive to see that boys are more involved in dramatic play for all its learning opportunities, and "Superhero" play can be a vehicle for positive outcomes, which is not often realised by adults who try to discourage it as "aimless and aggressive". Rather, with adult involvement/or intervention this form of dramatic play can become more productive. Parents did not identify this area as one that their child enjoyed. It may have been considered as part of the categories of "outdoor play" or "play with other children". Few parents mentioned the term "dramatic play" which may indicate that staff do not discuss this aspect of the curriculum, or at least in this term, with parents.

Girls participated mostly in traditional play activities such as art/craft, family corner, dough/clay and dramatic play. In comparison to Ebbeck's study, gains have made in areas such as climbing and sand play, but further that the type of play girls are involved in the sand pit area is often stereotypic (see Anecdotes 19, 39, 47).

It was interesting to note the equality of participation of girls and boys in maths/science area on Table 1. The figures show equality, but the interactions between adult and child in these areas is substantially greater for boys, as is the quality of the interactions (see Anecdotes 26, 30, 34, 35, 41).

Parents did not see the importance of children enjoying maths/science at this point in time, which perpetuates the misconception that these concepts are not being formed at this level, and have little bearing on future curriculum choices. It may also be that parents do not see that the learning of these concepts can occur through play.

## CHILDREN'S PEER PREFERENCES/INTERACTIONS

(Anecdotes 3, 5, 9, 10, 12, 16, 17, 19, 20, 23, 24, 25, 42, 48)

While staff did not perceive boys or girls to substantially exclude each other from their play, this is occurring in areas where girls need to participate, such as manipulative, dramatic play - maths areas.

While girls participation in art/craft is higher than boys (and this also confirms Ebbeck's results) again, the content is often stereotypic. Boys are drawing/painting scenes of fantasy, cars, the countryside, etc. and the girls main focus is themselves and family and friends.

Positive, co-operative play was more evident in the day care settings than in pre-school. This could be due to the fact that these children spend more time with each other and therefore more time to get to know each other. On the average, children in day care had been in attendance in the centre together for a greater period of time than pre-school children had been.

While co-operative play between girls and boys was significant in terms of frequency (41%), again the quality of this type of play was in favour of boys. Boys tended to be the leader or dominate the play more than girls, or boys used this opportunity to assert their superiority over girls. For example:-

A boy and a girl were doing a maths matching game.

**Boy:** *"That's number 8" says the boy.*

**Girl:** *"No it's not".*

**Boy:** *"Yes it is you stupid" he said with annoyance. (It was 9)*

The girl gets up and moves away (Anecdote 38; similar examples can be seen in Anecdotes 9, 12, 14, 16, 22, 23, 24, 36 and 40).

On some occasions girls were more assertive and would not allow themselves to be manipulated by boys (see Anecdotes 5, 19, 24, 39 and 42). Assertiveness was not substantially considered to be a desirable attribute for boys or girls by their parents. It is a possibility that assertiveness could be confused as aggressiveness by some parents, and thus it would not seem desirable for boys or girls. This was evident in the parent questionnaire, especially for girls.

The study highlights low scores for adults directing children to and from an activity and this could confirm that adults respect children's choices of play activities and peers, but thereby may give unconscious support for sex-typed play by children (Ebbeck, 1985; Brophy and Good, 1978 and Rodd, 1986). The previous studies indicated children's preferences for toys, activities and peers can be based on same-sex preferences which can result in stereotyping. Can and should the adult in an early childhood setting intervene in children's selection of toys, activities and peer group? Many would argue that a range of opportunities and experiences exist within the programme and that part of children's development involves decision and choice-making which should be respected. While in principle one would agree, adults should be mindful that if children's choices and decisions are based on stereotypic concepts about themselves and others, that they do a disservice to children and their future potential by being unresponsive to these issues.

## ADULT/CHILD INTERACTIONS

Other studies have been conducted to determine the level of interaction between teachers and girls and boys and if differential treatment exists. Ebbeck (1985) for example, conducted an observational study of 30 pre-school teachers in South Australia. Evident in the data responses was the finding that approximately 63% of the verbal interactions were with boys and approximately 36% were with girls. Similarly, teaching instruction was directed at boys in 60% of the situations and 40% with girls.

While the frequency of interactions is important, the quality of these interactions may be even more critical. Bruce (1985) noted that when girls did not know an answer the teacher reassured them and moved on, whereas if the situation involved a boy, exploratory interaction often occurred to persist or search for the answer. Another study also found that boys were given eight times more instruction on how to solve problems for themselves, whereas the teacher would often do the task for girls (Sadker et al., 1977). Also, girls seek adults' help more than boys but for reasons less likely to foster cognitive development (Hodgeon, 1985 cited in Perrett, 1988).

My findings concur with Ebbeck's study in relation to adult/child interactions being significantly towards boys. The data reveals 61% of verbal interactions were with boys, while only 39% were with girls. While the total of all interactions is 43% with girls and 57% with boys, the dominance of adults' interactions with boys must be of concern.

Again, the quality of these interactions need to be highlighted. Peters (1987) states that "*...what largely governs the quality of learning that occurs (in a classroom) is the quality of the interaction in it*". If children are to gain confidence, to think laterally, etc. they need to be given stimulation and appropriate challenge. The frequency of "quiz-type" questioning by adults rather than supportive, interactive communication also needs further investigation. In areas such as extending the child's language and knowledge, the use of open questions and the involvement of adults in children's play, boys benefited more than girls.

For example:-

Two boys and one girl in a block corner. She is placing her pieces in a long line. The boys' construction has different levels and they are using a variety of shapes. The teacher comes over and asks the boys about their work, as she gets down to their level. The girl moves across and touches the teacher's shoulder.

**Girl:** *"Look at my long road".*

**Teacher:** *"Yes, good girl" replies the teacher and she turns back toward the boys.*

**Teacher:** *"Do you need to build the walls higher or is it ready for the roof?"*

(Anecdote No. 43; see also 4, 13, 26, 27, 30, 31, 33, 35, 37, 41 and 47 for other examples).

Adults also responded to the disruptive behaviour of boys in over 76% of these type of interactions, giving them greater attention. Teachers need to look at reducing this type of behaviour rather than giving more attention to it. Group dynamics, in particular the pattern for boys to play together in large groups often results in adults spending a lot of time "controlling" these large groups. Girls however tended to be in either dyadic, triadic patterns or singularly, but rarely in groups of four or more girls. Thus the balance of adults' attention is tipped towards boys as a result of these group patterns.

This study also confirms Huston's (1983) conclusion that art and manipulative activities take up most of the adults' time during free play activities. When the teacher was more actively involved in other curriculum areas the play of the children changed (see Anecdotes 4, 13, 28, 32, 33 and 44) and the girls' level of self-esteem was raised. The participation of a male teacher in the family corner, in one centre seems to have significantly raised the level of participation of boys in this area and contributed to some instances of less stereotyped play. (See Anecdotes 1, 4, 13).

## THE QUESTIONNAIRES

The responses from the staff questionnaire did not seem to accurately tap the responses needed to determine wether a real mismatch of what adults perceive and what they actually do in providing gender equity in their service exist. Although the results did confirm that adults indicated children's play preferences of activities, themes, etc. generally still reflect sex-typed play.

From the responses, I can only speculate that staff are unconscious of the amount of time and the quality of the time they spend with boys as compared to girls. I would also question how staff believe that gender equity is or is not an issue for them and parents as 50% indicated they have had no involvement in either reading on the topic or attending inservice courses.

Some staff seem to be aware of gender equity issues, but have not indicated whether their centre has ever evaluated the programme to determine its equity. Others acknowledge it, but do not consider it to be relevant to themselves and the service in which they work.

Parents indicated that socialisation was an important gain that their children received from attending an early childhood centre. While staff were not asked to comment on this aspect, the reporter's knowledge of the field would confirm that staff would support this view. So staff in liaison with parents are in a vital position to influence children's socialisation.

## CONCLUSION

While the sample of centres was very small, some important conclusions may still be drawn. Progress towards more gender equitable programmes have been noted in some centres, but we need to look past the superficial progress of seeing girls in the block corner, boys in family corner, etc. to determine what is actually happening once children are in these areas. The quality of the interactions between children together and between children and adults needs to be examined even closer. The quality and the salience of interactions are as influential as the number of interactions taking place. Positive adult interaction which can lead to less stereotyped play and behaviour is vital if all children are to gain substantial benefits within any programme.

Teachers need to look at the quantity and quality of cross-sex play and group work. Lilian Katz, on a recent visit to Australia, highlighted the need for more project work that all children can be involved in and contribute to and work together to help break down some of these stereotypes. Parents and staff need to work closely together on this issue because if it is not supported in both environments, then inconsistency arises and further compounds and confuses the messages that children are receiving.

The impact of sex-role stereotypic behaviours and expectations can produce outcomes of limited social and occupational choices that can contribute to women's poverty and social dependence, according to the Commonwealth Schools Commission (1987). Therefore sex-typing of play styles, preferences, behaviour and expectations at the early childhood level, need to be recognised as having implications for the social and cognitive development of children that can affect their future skills, interests, career opportunities and aspirations. While gender cannot be dismissed as an aspect of human development, individuals should not be disadvantaged or limited as a consequence of it. Individual differences and abilities need to be nurtured and developed and not constricted by traditional sex-role stereotypes that are based on biological and physiological differences.

As influential socialising agents, adults in early childhood setting must actively and consciously work towards the removal of stereotyped beliefs and attitudes about the sex-role, behaviour and future potential of individuals. Disadvantage comes from within our social system (including culture and education) not from children's inabilities to capitalise on the "equal opportunities" that they are given.

The perception that children's choices should be respected, that equal opportunity exists and that there is no differential treatment between boys and girls may contribute to the complacency about sexism in early childhood education (Brophy & Good, 1978; Bruce, 1975; Ebbeck, 1985 and Rodd, 1986).

Complacency seems to be the enemy - *"Girls and boys are playing together, they are treated equally, they are taking on non-stereotypic roles, etc. and therefore gender equity is a reality in our service"* seems to be a generally held view. However, on closer scrutiny, gender equity may not be the state of play in some children's services.

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# LIVING HAPPILY WITH TELEVISION

Linda McGilvary and Pat Penrose.

"When I was a child I played with guns and they never did me any harm."

We used to play bows and arrows especially after going to the Saturday pictures. It's a wonder we didn't hurt each other."

"In my day we threw cones or acorns at the other kids, playing war games. We all did it."

If playing violent fantasy games is a normal part of growing up as it seems, why do we need to worry now?

From what we know about child development learning about fantasy, pretending, role playing, dramatic play or whatever you choose to call it IS a normal part of growing up. It is about developing the imagination. Children who learn to tell the difference between fantasy and reality in these early years are healthy.

There is a difference however, between the way we used to get our ideas and act them out and the way it happens now. The amount of violence and inappropriate information that comes at children through television and other media is of concern. Giving a child a toy weapon is condoning the war-type play that the toy offers.

In order to develop the imagination and learn about the reality/fantasy concept children go through a series of stages.

Fantasy Play Stages * (from "Take Another Look" Pat Penrose 1991)

"1 Young children may imitate the actions of adults close to them, for example, copy a parent using a vacuum cleaner. The play is likely to happen when the child sees a vacuum cleaner and wants to use it.

2 Functional Play The child handles equipment. May dress up but quickly removes garments. Will be surprised if she/he sees herself/him in the morror. Watches other people. Often moves into the play area after the bigger children have left and handles the clothes that they have used.

3 Constructive Play Children play for longer periods and NEED the props in order to play the game. Later, children will improvise or make their own props. They verbalize " I am Batman."

4 Dramatic Play A child can now take on a role and be another person or thing. She/he can imagine props by saying so: "This is a boat and I am a pirate." The play lasts longer, and can involve two or more people with verbal interaction.

5 Games with Rules These are usually played by school children and are related to moral development - the rules can be changed if they do not suit! (Have you ever played a board game with an 8 year old?) They will develop secret clubs, codes, initiations etc.

These stages, like other stages in development proceed in order and cannot be hurried along though an interested adult can do a great deal to enhance the learning. Stages in the development of fantasy closely parallel those of social development in young children. For example, a child not yet able to play in a group (social) will not be able to take part in dramatic play (stage 4) which depend on the child being able to play in small groups."

## VALUES OF FANTASY PLAY

Other values of this type of play are the enjoyment of making friends through playing in a group situation, developing the social skills of sharing and co-operating with other children. It is a natural way for language to develop, especially where roles are being used. There is a chance to practise roles particularly to understand those of people they are familiar with. Shy children are able to communicate in a safe way and attitudes are shaped and clarified through interaction with others. Pretending allows experiences to be re-enacted to gain a sense of power and to understand what has happened to them.

Initially children think (unconsciously) that everything is real. From some research (Penrose 1977 and 1978) it was shown that children relate to the world according to whether "people" relate to their own body - so when asked if Batman was "real" the children would say "yes" or "no" for the same reason, "he walks like me", "real skin", "the head is real (because he talks or it moves) rest pretend", "people just hiding" or "coz he flies"(moves).

This understanding explains why some children know that the Ninja Turtles, for example, are not real but at the same time are frightened of Father Christmas, clowns or other real people acting. The child understands that the person is not what it seems but cannot relate the person to their own self and the knowledge they have about themselves.

It was interesting in the 1970's to find that programmes children actually played out in the playground were Batman, Kung-Fu, Spiderman and Wonder Woman - all programmes that could be called "fantasy". More latterly the list of programmes children act out include "high drama" e.g. Dukes of Hazard or science fiction type/fantasy ones. It is the fantasy nature of programmes that children in early childhood are attracted to copy rather than the violent component.

This is because children are trying to make sense of their world, to find out the difference between fantasy and reality. We know children do this by trying it out. Once the mystery is solved in play, the play changes just as it always has.

A problem for early childhood teachers is that frequently the kind of play that comes from television is disruptive, aimless and rough. Some teachers try to ban it but children act out what they do not understand and adults have to find ways of helping the play more positively.

A reason the play is aimless, disruptive and rough is because the child only picks up the character from the story on television. Remember the child judges the character according to his/her own body and so only gets the significant events e.g. Ninja Turtles fly, Dukes of Hazard have fast cars etc. The story line goes too fast. There is no time to pause and discuss what is happening with an interested adult.

Consider the difference with a story from a book. Children return to the book many times until the child knows the characters and the story-line really well. Once these are understood then the child can change them.

Some difficulties children have are with real people doing unusual things e.g. Batman, The Man from Atlantis. The costume can give an older child clues about who the character is but can endanger children who may test out an idea believing they can do it. It is wise to make such situations as safe as possible however, to avoid accidents. Children in high rise buildings overseas have been known to be killed trying to fly because they have a distorted perception of height.

Children in this age range are in the process of learning to distinguish reality/fantasy. It begins before the child is one year old and children learn that when mother leaves she will come back (object permanence). By about 7 years the reality/fantasy concept is established.

REALITY

- Last year television violence reached an all time high on local television. The Mental Health Foundation of New Zealand's annual survey revealed that in 1990 the total number of violent incidents incresed 3-fold from the previous year. TV3 topped the poll with a rating of 10.2 incidents an hour. (Tube Views Feb. 1991, Page 12)

- It is estimated that the average American child will see 32,000 murders, 40,000 attempted murders and 250,000 total acts of violence on television before reaching the age of 18 years. (NZ Listener and TV Times Sept. 24 1990, page 54)

- Playmate Holdings Ltd (Hong Kong) - the sole licensees for Teenage Mutant Ninja Turtles announced a 1990 net profit of $262.8 million (NZ) (Play for Life, NZ Newsletter, July 1991, page 15)

- Included in the 1990 USA Top Ten best sellers were Teenage Mutant Ninja Turtles, Barbie, WWF Wrestling Figures, Batman and GI Joe. (Play for Life Newsletter, July 1991, Page 15)

- Most New Zealand children watch 20-24 hours of television per week - that is 2 years of fulltime watching by the age of 16 years. (NZ Listener, Nov. 26 1988).

So what does this mean on an individual level? What are our children learning from television advertising and programmes? Children are not passive observers of the world around them. They are active participants - watching, assimilating and trying things out as they learn life skills. Television, with its wealth of information about other people, different lifestyles, fantasy and fact provides a window on the world right in our homes. Many of the images may sit comfortably with our famly lifestyle and attitudes but others will grate against our value system.

Some messages children gain from television are stated, others are more subtle. Through their viewing young children are shown how to interact with others, how to resolve differences and ways of behaving socially. Unfortunately many television programmes and videos aimed at the children's market, including cartoon and drama series, provide children with a strong message that arguments should be solved by fighting, exerting physical power is a "good" way of overcoming problems with others and that name calling and threatening are practical skills for getting what you want. Frequently weapons are portrayed as an effective way of dealing with problems and characters who have different views to the "hero" are bombed, stabbed or shot so that "right" can prevail. Someone always wins and someone always loses.

Often programmes originally designed for adults are shown as children's programmes e.g. Dr Who.

What do children learn about the roles of males and females from television? There is much data to show that while male characters have adventures, rescue people and engage in physical action the female roles are passive, centered around the home, seen to be beautiful but simple and support the male in her life. Toys marketed during the commercial breaks reinforce these models - with action-type toys presented for boys while girls are encouraged to be nurturers and homemakers.

Television has an important role in introducing children to the consumer society. Commercials present glossy views of the latest toy, crisps, sugared snacks and drinks to children who do not have the skills to descriminate. Since adults also buy from advertising it is apparent that the methods are successful. A recent analysis of television commercials aimed at children noted that the graphics, photography and audio levels were superior to the programmes they surrounded and that there was continual repetition, (Notar, E. "Children and TV Commercials" "Childhood Education Winter 1989, pages 66-67) presumably so that watchers would catch the message to buy or want the product.

After pressure from their child who has seen the advertisement some parents will purchase the product in the belief that giving their child what all the other children want is an expression of their love for that child. Some fad toys amongst a variety of other types of toys may be appropriate especially if a child saves and buys that toy his/herself. It is the children who do not have access to books, creative toys, outings and adult interaction and who watch a lot of television we need to worry about.

The cartoon Teenage Mutant Ninja Turtles currently playing on TV3 typifies the 1990's fast-moving slick style of programme for children. Although originally produced for the "young teen" market its audience includes under 5's - a result of several factors such as scheduling, advertising of the programme and a strong campaign to sell spin-off products.

In Teenage Mutant Ninja Turtles the turtle "heros" use violence to achieve their goals, imply that might is right if you are a "goodie", trivialise the real effects of physical violence by springing up unhurt to do battle another day and portray a glamour image which appeals to young children. April, their reporter friend and helpmate, despite being a modern career woman, is constantly being cast in situations where she needs rescuing by the male turtles - thereby reinforcing traditional sex-role stereotyping. During each episode TMNT characters consume great quantities of pizza - an effective way of advertising the company which sponsors the programme. The commercialism that TMNTs have achieved worldwide has run into millions of dollars with everything from wallpaper to turtleos (green cheerios), soft toys to sticking plaster and bread. An amazing achievement! An analysis of the programme showed that an average hour of TMNTs includes 34 acts of violence - that is 85 per week for those who watch every day. (ChCh Star, 11/7/1990, page 2) The attitudes to life this programme contributes do nothing to foster a society where women and men are equal, where conflict is solved in a peaceful way and where wealth is shared. And TMNT is only one programme ---

How does television portray NZ's cultural reality? A visitor from overseas might be forgiven for thinking that the typical family here is white and middle class. Where are the tangata whenua, the Samoan, Niuain, Tongean and Asian people of this land? Rarely do they appear in programmes or commercials - a fact indicative of who holds the power in Aotearoa. Children are not immune to this message.

The high cost of producing quality local television tends to mean that young people are subjected to a continual stream of cheap overseas material. Children's television at present includes many American cartoons and advertisements, displaying attitudes, values and trends which reflect that culture.

Although children may not be able to articulate their knowledge gleaned from television we find out what they have learned by looking at their behaviour. Young children are great imitators and imitate that which puzzles them. Research supports the observations of parents and professionals working with children that youngsters who see violence not only imitate it but show aggression in other ways e.g. using weapons to hurt other children, using Kung Fu kicks. A longitudinal study carried out at the University of Illinois found that subjects who watched large amounts of television at age 8 were more likely than other subjects in the study to have been arrested and prosecuted for criminal acts by the age of 30 years. ("What do children learn - what do parents do?" V.I.P. Murray and B. Lonnburg. TV Foundaton Info Sheet). Despite a wealth of evidence that indicates a relationship between television violence-watching and aggressive behaviour opponents argue that research has not yet proven this link: however there are no studies available which show that watching a diet of violence, racist, sexist, consumerism has positiveoutcomes for children's learning! There is ample evidence that viewed violence will affect children who have a predisposition and those who view a regular diet will imitate it. Research (Penrose, 1979) shows that there is a correlation between the amount of television the family watches and that of the child.

Small children are normally active doers - constantly moving, interacting and exploring. When watching television they do not use and practise many of the motor skills they need to develop in these early years. While it has been observed that small children will play in front of television, most children spend long hours sitting still with eyes fixed at the screen. Vision and hearing may be stimulated by television viewing, movement and sensory development are not.

This is not to say that television is all bad - just that things have changed over the years as television is on longer, has more channels and techniques are more sophisticated.

Despite this rather grim scenario there are many ways we can use television positively at home, in the classroom and in society. Children learn from the real life adult models around them. Changing our own viewing habits may be a first step to changing those of our children. Watching selectively and critically are skills which children can be taught in the same way that parents teach children to clean their teeth and go to bed at certain times. As children become more media literate, analysing a programme, noting how special effects are created and discussing the underlying messages, their intellect is challenged and developed. Talking about favourite television programmes with children encourages them to think about what they have seen. Allowing opportunities for them to experience power over their environment in a creative non-competitive way removes the need for violent weapons in play.

How can we reach those parents who through ignorance do not realise the effect that too much television is having on their child? Television could help by providing programmes aimed at teaching the parents (like "You and Your Child" which was immensely popular). A message to parents tagged on the end of young children's programmes to guide discussion could be useful. However, to say that parents are solely responsible is not enough - parents if you talk to them - trust television to provide programmes which are suitable for children. This may seem naive but that is the reality we hear working in early childhood.

We, as people working towards the prevention of violence need to be aware of the issues surrounding television and promote a healthy balanced style of living where television is just one part of life.

No reira tena koutou katou.

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# HINTS FOR LIVING HAPPILY WITH TELEVISION

1 Is your television dominating the living area in your house?Try putting it in an obscure place in the house.

2 Allow your children a certain number of hours each week for television. Encourage them to make the best use of their "telly" time by suggesting that they plan their viewing for the week with the help of the weekly viewing guide.

3 Express your views on children's programmes (in writing) to local stations. But don't forget to praise as well as criticize.

4 Television watching is a tidy occupation, while kid's play is untidy. Do you care if part of your house is a mess for a while? Forget the housework sometimes and join in with the kids. They may be so appreciative that they will be very helpful for a time!

5 Show (by example) that hobbies can be fun. Encourage the borrowing of books on skills and crafts from the library.

6 Arrange family outings. Have a Sunday barbecue in the bush. After the sausages, throw a ball, play cricket, go for a jog or a long walk. Make the kids so tired that they won't even think to turn the telly on at home!

7 Find time to watch television with your children and discuss it together afterwards. Do the goodies always win in real life? Why did the shoot-out seem like a game? How could the hero be so strong and healthy on his diet of fast foods? Did the monster scare you? Can you think of a better ending? Questions, of course will depend on the age of the child.

8 Support the teaching of mass media education in schools (not just television but newspaper and radio as well).

9 Draw up your own family critique chart and let viewers fill in the necessary spaces. Their comments should be interesting!

10 If possible, take the children to live entertainment so that they can learn to appreciate the real thing.

11 Occasionally make fun of some of the television values that you don't like - for example, that reflex reaching for the disprin when headaches start!

12 Suggest to television stations that they provide access for public comment on their show.

13 Join Play for Life or Children's Television Foundation.

14 Turn off the television when the chosen programme is over. Bring out the books and games.

15 Don't be a television knocker all the time - remember current affairs, shows, sporting coverages, wild life series, programmes on other countries are all educational.

16 Discuss the procedures that your family will follow when visitors arrive. Should the television be switched off?

17 Read stories aloud to your children. Try making up some together too.

18 Boycott the fad toys advertised on TV. Instead provide toys and materials which challenge the imagination and encourage creative and constructive play.

19 A poor choice of programme by one of your older children - discuss why you don't like it. Then it's up to you - either you let the child watch it alone, or you switch off the television set.

20 Pressure politicians to legislate for the abolition or reduction of advertising during children's viewing time.

21 Can we convince big business that we would like (and buy) their products more if they spent less on elaborate advertisements and used the money saved on funding quality children's programmes? What effect would the following statement have on you? "We are economising on this advertisement because we are funding the children's programme which follows."

22 Utilize your video to record pre-selected programmes to use later.

(Excerpts from an article by Brother Kelvin Canavan on CHILDREN'S TELEVISION - MAKING BETTER USE OF TELEVISION.)

Much will depend on the age of the child and the home situation.

With young children parents need to exercise some control over what is actually watched on television. In selecting programmes for, or preferably with, their children, parents are advised to consider such factors as:

- the developmental level of the child
- the appropriateness of the material
- the child's likely response to the programme. Will it result in nightmares, produce anziety or fear, or induce belief that physical violence is a perfectly acceptable form of self expression.

Here we need to remember that a very young child cannot usually differentiate between fantasy and reality and hence is likely to be disturbed and upset by material that an older child could view and assimilate without being harmed.

The following activities are recommended to parents anxious to help their children to develop as more critical and discriminating television viewers.

1 With their young children parents could aid the early development of sound viewing habits by asking a few simple questions at the conclusion of a television programme. For example:

- How did the programme begin?
- What happened next?
- How did it finish?
- Which character did you like best? Why?
- Which character did you like least? Why?

Questions such as these should bring forth some response from the young viewers and help to sharpen their awareness of right values.

2 With slightly older children parents might ask them to suggest alternative endings. For example, what might have happened if the police car had arrived after the bandits' helicopter had left the bank?

## TELEVISION

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# FANTASY IS FUN

Pat Penrose

Ask a group "What is fantasy?" and it can be seen that fantasy is different things to different people.

Close your eyes for a moment. Hold out your hands in cup-fashion. I place an apple in your hands. Feel your apple all over until you know it well. Smell your apple. In your minds eye picture your apple. Eat your apple. What sound does it make? What taste does it have? Is it sour or sweet? What is happening in your mouth as you visualise the taste? Throw your core away - or eat it if you wish - then come back to the "real" world. Ask someone near you what their experience of the apple was. Is it the same as yours?

Your imagination is your own. It grows and develops like other aspects of development according to the nuturing and experiences it gets. If we want adults who have good self-esteem, can think laterally, are open to new ideas, are willing to take risks, recognize possibilities, accept differences, can cope with change and have developed their IMAGINATIONS then we need to start in early childhood.

Fortunately children come equipped to be enthusiastic in developing imagination. Adults are sometimes frightened of children's imagination - perhaps they think their children will never learn to tell the difference between reality and fantasy. They say "stop day-dreaming" and "You're telling stories again."

The fact is that young children are in a very heightened stage of fantasy. They are in the process of knowing first that everything in the world is real and then beginning to doubt that. For example, when they act out roles and play pretend games they have reached a stage of "this is not quite what it seems according to what I know about real people." It is helpful for us to know the stages children go through and to know that adults can help by entering into the child's world of fantasy. Ways of doing this in a practical way are the topic of this workshop.

The Values of Fantasy Play and the Stages of Fantasy Play are found in the paper "Living Happily with Television" by Linda McGilvary and Pat Penrose.

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# EMERGENT LITERACY IN NEW ZEALAND: AN EXAMINATION OF PROMOTION AND PRACTICES IN EARLY CHILDHOOD CENTRES

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## Abstract

This paper is part of a doctoral proposal designed to gather together available information about the practices and promotion of emergent literacy in New Zealand. This raises questions about what parents and teachers consider to be "normal" development in early childhood in New Zealand and demands investigation of how such constructions are promoted in the various early childhood centres and in the home. This will involve exploring the theoretical base of the "free play" curriculum, and the implications such a curriculum has for learning. The paper will discuss an alternative curriculum which may aid the development of literacy skills, promote socialization in the centre between teacher and child, and promote reading achievement later on in the primary school. A Vygotskian model of "scaffolded" literacy development and a literacy centred curriculum will be explored as alternatives.

## Introduction

For many years, the preschool years in New Zealand were seen as the period for getting children "ready" for formal instruction upon starting school at the age of five. Many early childhood centres, particularly the Playcentre movement, have espoused the notion of a "free play curriculum" as a reflection of their philosophy of child centred, active learning through play. The influence of "free play" is reflected in the curriculum of many New Zealand kindergartens and childcare centres to various degrees.

Research in recent years has highlighted the importance of these years for learning the concepts and functions of reading and writing, skills which are built upon during formal education. Many centres encouraged "pre-reading" activities as a way to promote the easy transition to school. However, recent research into emergent literacy suggests that children develop literacy skills long before they reach school, and that this emergent literacy is an integral part of later literacy. A "literacy-rich" and "scaffolded" learning environment is proposed as the ideal context in which to develop a knowledge of literacy in a culturally sensitive and developmentally appropriate manner.

The present paper will outline the direction and focus of my doctoral research. This research will set out to examine what understandings parents and teachers have of their children's development and hope this reflects in their practices. Second, it will investigate what the policy and practices of parents and teachers toward emergent literacy are in New Zealand early childhood centres. I intend to base the research around the Palmerston North area. It will also examine the implications of the Government's new "parents as first teachers" policy. Finally the research will involve designing a "literacy centred curriculum" for New Zealand early childhood centres, and will conduct a small scale trial of this curriculum.

This paper will discuss the three pronged approach which this research will take. First, it will examine the prevailing theoretical orientation of the "free play" curriculum in New Zealand centres, and how this influences what is perceived as "normal" development. Second, it will introduce an alternative way of understanding how children learn, and an alternative curriculum, based on the Vygotskian model of a "scaffolded" learning environment. Finally, it will discuss how a literacy centred curriculum would use the Vygotskian model and the best aspects of the "free play" curriculum to maximize opportunities for children to learn the functions and concepts of reading and writing through their play. Such a curriculum also validates the importance of skilled teaching in early childhood centres.

## Exploring a "Free Play" Curriculum

"New Zealand free play programmes are based on a philosophy of education which sees the child as an active learner with his or her knowledge being constructed rather than acquired" (Meade, 1985, p. 112). Meade (1985) states that the "free play" philosophy is very widely accepted in New Zealand childcare centres. The teacher's role in the child's learning is in the provision of direct, personal contact and in the arrangement of the learning environment; space, things, time, people. Meade suggests that the free play approach creates the impression that adults set up the environment and that the children do the rest; which would be chaotic. In reality, teachers have adapted strategies for enhancing learning in a free play programme, but many teachers have difficulty in articulating their reasons for their approach. Lazar (1983) found that some people really deny that there is, or should be, a curriculum. He points out that there is always a curriculum, whether obvious or not. As he stated in 1983 (in Meade, 1985, p. 35):

> Someone selects the materials, the stories and songs. Someone decides on their sequences and availability. Someone rewards or ignores specific behaviours. All of these are curricular decisions. If the teacher is unaware of the educational, social and personal learnings provided by these choices, the child may be cheated, confused or simply pulled in random directions. If the teacher thinks through the goals of the activities, essentially the same materials and activities can be organized into a coherent programme for optimal learning and development.

Although children may gain an understanding of the physical world through playing with sand, water and blocks, they also learn about the social world of the school (Tizard & Hughes, 1984). A new code of behaviour is introduced to them, along with routines, how to communicate with staff and how to focus on play. All of these things teach the child what is considered to be appropriate behaviour in a school setting. The play environment gives the child room to explore, make a noise and to make a mess, but learning by observing an adult is excluded. Such a child centred environment, which is designed to encourage self initiated play, may be completely inappropriate in cultures such as the Maori, which place an emphasis on the whanau or the group, and do not recognise the individual. For a child exposed to such cultural differences, school must become an inherently confusing and bewildering place. Similarly, for the child from a Kohanga Reo entering the school system, a new code of behaviour must be learned before they are able to succeed. Any curriculum must be thought about and justified carefully, in order to prevent a simple monocultural reproduction.

The notion of not expressing curriculum goals seems prevalent in New Zealand literature. As Smith and Swain (1988, p. 39) state, "childcare should have developmental rather than curriculum goals". They further suggest that childcare should encourage dynamic development, toward a greater complexity and diversity of behaviour, rather than teaching specific skills or knowledge. Tizard and Hughes (1984) report that British preschools have clear intellectual aims; in general terms to "develop the child's full potential". Language development is a high priority (through conversation) as are developing basic skills and understanding. Furthering social development is a primary aim, to make the child independent of the mother, to be a member of a group and finally to prepare the child for primary school, listen to staff, follow instructions and so forth. Although Tizard and Hughes (1984) noted that these aims were clearly articulated in most centres, most supervisors were puzzled by the notion of having a curriculum; as they did not promote a specific body of knowledge or skills, which had to be taught in a specific period of time. Instead of teaching, *per se*, these supervisors saw their role as providing a rich learning environment. In this enriched environment, the play materials provide the curriculum (e.g. shaped, variously sized water containers teach the child concepts of space and volume). Supervisors reported that they encouraged development by providing a planned environment, in which children learn by self initiated play. Supervisors do not teach reading and writing skills, but propose that they lay the foundations for these to later occur by providing activities that develop pattern recognition, hand-eye coordination, spoken language, and the relationship between stories and printed text (Tizard & Hughes, 1984).

Smith and Swain (1988) propose that intellectual growth is encouraged through play; whereby children can explore and experiment with the environment, stretch thinking and reasoning through making mistakes and actively participate in increasingly complex play. Similarly, Bronfenbrenner (1979, p. 60) reinforced the appropriateness of a "free play" philosophy when he addressed New Zealand audiences in 1979. As he said, "Learning and development are facilitated by the participation of the developing person in progressively more complex patterns of reciprocal activity with someone with whom that person has developed a strong and enduring emotional attachment".

Clarke-Stewart (1982) proposes that childcare programmes can be examined along an open-closed dimension. Along the "closed" dimension, learning can be classified in the following way: "she (the teacher) tells the children what to do and when to do it. She gives the class clear and explicit lessons, usually according to a strict schedule" (p. 77). An American example of a closed programme would be the Bereiter-Engelman programme. The programme consists of patterned drill, teacher questions and responses, pre-reading and maths activity, in a sparse environment. The goal of such a programme is to increase IQ scores and to teach social and intellectual skills relevant to the school situation. A New Zealand example of a closed programme is Dr Jane Ritchie's Hamilton intervention programme with Maori pre-schoolers. There are also certain parallels with Te Kohanga Reo centre programmes.

By contrast, Clarke-Stewart defines "open" programmes as indirect, individually directed, free to explore and select activities. Interaction is informal, one-to-one and on a flexible schedule. Interaction also revolves around play and materials, rather than an academic curriculum. As Clarke-Stewart (1982, p. 77) states, "she (the teacher) prepares materials and activities for the children, but then lets them choose among them, going at their own pace, following their own interests and making discoveries about the world on their own. She guides, encourages, and helps the children in their activities but does not exhort, direct, instruct or restrict them". One example of an "open" programme is Montessori schools in New Zealand, which use carefully prepared educational materials, at which children progress individually. Playcentres use a more relaxed approach, and simply provide the materials and allow children to experiment at their own pace.

A "free play" philosophy is founded upon the belief that the child actively constructs knowledge of the world. Such a view has theoretical roots in Piagetian theory (Wood, 1988). Piaget's theory, which proposes the child as an "active learner", suggests that the child's intercourse with the physical world provides the main constraints and contributions to the development of intelligence; the child learns as she acts upon objects in space and time. In this way it is the "things" of the environment which play a major role in the child's development. This view of child development is reinforced in the New Zealand Charter Handbook by the minimum standards for equipment and by the supervisors in Meade's (1985) study in their emphasis on purchasing bigger and better equipment. Meadows and Cashdan (1988) report that play has been idealised as a spontaneous, absorbing, refreshing, enjoyable, creative, ideal way to learn. Furthermore, play enthusiasts claim that humans need to play in order to learn, to work off surplus energy and to practise skills. Perhaps these claims have some truth, but they do not give a watertight reason for elevating play into the way of learning.

Justifications for a Piaget derived theory of the appropriateness of play as the way to learn in a preschool environment have three major sources (Meadows & Cashdan, 2988, p. 49):

1. Assimilation - according to Piaget, children fit materials to a play scheme, concentrating on those that fit the scheme and ignoring the rest. Later accounts (derived from Piaget) make play a balance between assimilation and accommodation, which implies that play in itself is a deficient way of learning, as it lacks testing against reality.
2. Activity - originally simply being actively involved in play was considered sufficient for learning to occur. More recently, theorists have suggested that "thinking about what has been done" is also required.
3. Readiness - learning is controlled and limited by development. This view advocates that there is no point to accelerating beyond the child's level of development or to teach skills which the child is not ready for. In play, children will choose the activity that they are ready for.

Piaget's theory acknowledges that social experience and interpersonal behaviour are an important part of development, but in his theory they play a limited and secondary role. Social interaction (especially with other children) mainly contributes to development by exposing the child to other points of view, providing opportunity for the child to rethink her own point of view. However, such a change can only occur when the child is in an appropriate state of "readiness" to accommodate a new concept. As Wood (1988) states, "for Piaget, any social facilitation of development only works when the child's own understanding, based on his commerce with nature is in an appropriate state of readiness for change" (p. 16). In contrast, Wood suggests that developmental readiness is an inappropriate way of understanding how children learn. Social interaction between the child, other children and other adults is the means by which Wood proposes that children achieve a "joint construction" of knowledge of the world around them.

In Piaget's view, "thought is internalized action" (Wood, p. 19). According to Piagetian theory, any analysis of human knowledge and intelligence must begin with a consideration of motor activity and practical problem solving. It also alerts us to one of his important educational messages, which is that children have to be active and constructive in order to develop their understanding of the world. It is this philosophy which is the impetus behind the "free play" philosophy; children must be active and playing in a stimulating environment in order for them to develop to their full potential. In many ways, such a philosophy takes the responsibility for learning away from the teacher and places it squarely upon the child. After all, if the child fails to learn in the stimulating environment provided, then the teacher can easily conclude that the child did not have sufficient "potential" to learn beyond the level achieved. Similarly, a structured programme places responsibility for the child to pay attention and to learn answers by repetition and rote learning. Neither open or closed programmes give an equal burden of responsibility for the child's learning to the teacher.

Meadows and Cashdan (1988) cite some recent studies of "free play" programmes in Britain, which provide interesting insights and questions for further research in New Zealand. Tizard et al. (1988) report that in their London study, free play observed was brief, simple and low level, possibly because the children were distracted by other materials, other children or that they were not put under any pressure by staff to complete any projects. Staff were rarely involved with children's activities, and there were no sustained games or conversations. More talk was observed between children, than between staff and children. Similarly, Burberry's (1990) Bristol study found that free play was simple and short in duration. There was little adult-child talk and no sustained conversation. Most adult talk was about play or instructive. Sylva and her colleagues (1980) found in the Oxfordshire groups that conversations between staff and children were rare, that there was a lack of challenging activity and that children engaged in only brief and simple play. As Meadows and Cashdan (1988) conclude, "It seems clear that a very high proportion of children's free play over the range of preschool centres is pleasant, keeps them busy, and does provide opportunities for learning and practising skills; but there is not much challenge, not much discovery, not much excitement, not much sustained conversation and not much persistence at working something out" (p. 37).

In the present research it seems necessary to examine how influential Piagetian theory has been on New Zealand parents' and teachers' (and children's) understanding of what can be considered "normal" development in early childhood. The social institution of childhood is "an actively negotiated set of social relationships within which the early years of human life are constituted" (Prout & James, 1990, p. 7). The immaturity of children is a biological fact, but the ways in which this immaturity is understood and made meaningful is a fact of culture. Childhood is both constructed and reconstructed for and by children.

Piagetian theory connects biological and social development. It states that children's activities, their language, play and interactions are significant as symbol markers of their developmental progress, prefiguring the child's participation in the adult world. Piaget does not see these events as significant to the child's social life or to the social context of childhood. As Prout and James (1990) conclude, "the decreasing irrationality of children's play as they mature is taken as a measure of an evolving 'rationality' of thought, charting the ways in which 'primitive' concepts become replaced by sophisticated ideas" (p. 11).

In Piaget's account, child development has a particular structure, consisting of a series of predetermined stages, which lead toward the eventual achievement of logical competence. This is the mark of adult rationality. Within such a rational scheme, children are marginalized beings, awaiting temporal passage, through the acquisition of cognitive skill, into the social world of adults (Prout & James, 1990).

Piaget's work has influenced many other accounts of childhood and social practice around children. His account of developmental stages inform western orthodoxies regarding childrearing practice (Urwin, 1985), and Walkerdine (1984) has shown that Piagetian theory lies at the heart of educational thinking and practice. The phrase "it's a phase" or stage is a common biological explanation to the breakdown of communication or social relationships. It is particularly important to discover how influential Piagetian theory has been on New Zealand parents and teachers regarding their understanding of their children's development and how this understanding influences their literacy practices with their children.

## An Alternative Curriculum

Tizard and Hughes (1984) accept the notion of the child as an active learner, but suggest that Piaget underestimated the role of verbal exploration, puzzling and thinking, in the child's cognitive development. In their study of preschoolers at home and at school, Tizard and Hughes noted that children tackled the task of making sense of a world they imperfectly understood, armed with curiosity, logic and persistence. Children were characterised by their persistent intellectual curiosity and were in a permanent state of intellectual disequilibrium. Such a view opposes Piaget's notion that the child is incapable of decentred or logical thinking at this age. In contrast it suggests that the child's view of the world is limited and distorted by an incomplete conceptual framework, rather than lack of logic.

Similarly, Piaget underestimated the importance of the child's interest in the social world of adults and the role that adults can play in helping the child toward understanding through dialogue. Dialogue, in this sense, is in marked contrast to a normal preschool setting, where an adult poses a series of questions to the child about play. On the contrary, "the adult listens to the child's questions and comments, helps to clarify her ideas, and feeds her the information that she asks for" (Tizard & Hughes, 1984, p. 254).

Resistance to new ways of thinking about childhood is pervasive (Prout & James, 1990). There is a correspondence between the concepts of social sciences and the ways in which childhood is socially constructed. The inherent Piagetian notions of developmental stages and developmental readiness have been particularly influential in the educational practices with children. Foucault (1977) calls these ingrained practices "regimes of truth". These operate like self fulfilling prophecies. As Prout and James (1990) state, "ways of thinking about childhood fuse with institutionalized practices to produce self conscious subjects (teachers, parents, children) who think (and feel) about themselves through the terms of those ways of thinking" (p. 23). The 'truth' about themselves and their situation is thus self validating. Breaking into this with another truth (produced by another way of thinking about childhood) may prove difficult.

However, it has become apparent, through the numbers of children needing reading recovery and the numbers of semi-literate adults, that the Piagetian approach, of encouraging children to be independent "active learners", is not helping all children to learn. The literature on emergent literacy demonstrates that all children have an oral tradition to bring to their education (Heath, 1986) and can, with sensitive and appropriate teaching, develop a meaningful and functional use of language and literacy. One of the ways this can be achieved is through the reconceptualization of the teacher-child or parent-child relationship in learning situations.

Children need sensitive help, from skilled people, with lots of practice and lots of feedback, if they are to learn effectively (Meadows & Cashdan, 1988). This may function as a "benevolent apprenticeship"; whereby the senior partner sets up learning episodes for the junior partner, helping her to arrive at satisfactory conclusions of achievement and discovery. The senior partner "scaffolds" (Bruner, 1986) the activity and helps the junior partner to evaluate the results. As the junior partner becomes more proficient, the senior partner lets go and the partnership becomes equal. Children are novices on tasks on which adults have become experts, and it is for this reason that education should be a sharing of expertise. For instance, a sharing of specific expertise may be showing a child how to paint a straight line on paper, but sharing general expertise may involve showing the child the easiest way to hold the paint brush, position the paper or improve a technique. A teacher may demonstrate that there is a metacognitive strategy involved in gaining expertise; to memorize tactics, plan, review results and so forth. If the teacher recounts these strategies verbally, as the task is undertaken, the child may perceive a worth to following similar strategies when she next attempts the task.

In a preschool environment, such "scaffolding" of the child's development can only occur where there are small adult-child ratios and where a commitment is made to talking with the child, rather than to the child. As Tizard and Hughes (1984, p. 261) state, "Instead of the present emphasis on fostering play, on devising ingenious ways of using play materials, and on questioning the children about their play, a higher priority would have to be given to widening the children's horizons, extending their general knowledge and listening to them talk".

In contrast to Piaget's view of the "active learner", Bruner and Vygotsky place more emphasis on the role played by a child's culture and its system of symbols (e.g. languages, sciences, books, diagrams, pictures and so on). Bruner and Vygotsky propose that such systems have a dynamic structuring effect on learning and development, as they are not part of the mere "content" of the environment, but part of the structure and of activity (Wood, 1988). As Wood (1988, p. 16) concludes, "When the child learns a language . . . he does not simply discover labels to describe and remember significant objects or features of his social and physical environment but ways of construing and constructing the world".

It is for this reason that it is impossible to divorce the academic study of children's thinking and learning from moral, political and economic issues concerning the resources we allocate to education and the way in which we train teachers. What it means to be a "teacher" depends, after all, on how we construe children as learners.

Vygotsky proposed that a "zone of proximal development" exists between what the child is able to do alone and what she is able to achieve with help from one more knowledgeable or skilled than himself. He proposed two levels of development: the actual or present level (what the child can do on her own, determined by independent problem solving); and the potential level (determined by problem solving which the child can achieve by collaboration with an adult or more competent peer). It is the distance between these two levels that Vygotsky (1978) calls the "zone of proximal development". Vygotsky further suggests that readiness is not only the state of existing knowledge, as Piaget advocates, but is also the capacity to learn with help. Bruner (1986) suggests that the zone of proximal development explains how the more competent assist the young and less competent to reach higher ground from which to reflect more abstractly about the nature of things. In this way, the child's development and mastery of skills is a "cooperatively achieved success" between teacher and pupil (Wood, 1988).

Vygotsky (1978) disagreed with Piaget that thinking and knowing were largely a result of individual reflection on our own activity, and that other people were of minor import. Piaget saw social interaction as a major factor behind cognitive development, but less important than self generated activities. These activities are largely "egocentric"; that is, within the individual, rather than between individuals. According to Piaget, language and the social environment enrich the pattern of thought that the child has already constructed. Vygotsky emphasized what we learn from interacting with others, how we are helped by being taught and what we learn from what we see others do. Vygotsky states, "Human learning presupposes a specific social nature and a process by which children grow into the intellectual life of those around them" (1978, p. 88). For Vygotsky, knowledge is social, and what we are able to do is much more a matter of our upbringing and education than our inborn potential; development is very much a product of the child's participation in the social world (Meadows & Cashdan, 1988).

Vygotsky believed that the transition of mind across history is effected by successive mental sharings that assure a passing on of ideas from the more able or advanced to the less so. The medium in which the transmission occurs is in language and its products: literacy, science, technology and literature.

There are three key terms which are important to an understanding of how a Vygotskian model may be used to an alternative free play curriculum in New Zealand centres. The first of these is "scaffolding" (Bruner, 1986) or the process whereby an adult or competent peer bridges the zone of proximal development for the child. The adult "ups the ante" in a learning situation, facilitating the child's mastery of a new skill. The other terms which are particularly relevant to a literacy centred curriculum are "access" and "mediation". Vygotsky's notion of access and mediation is useful in examining how the process of learning to read is essentially social in nature (Teale & Sulzby, 1987). Access basically means having appropriate written materials in the home or school, although it tends to implicitly assume a mediator to these materials. Teale and Sulzby indicate that this access enables the child to develop concepts about books and reading: directionality, that print (not pictures) convey meaning, how to locate a word and so forth. They also suggest that children (from 2-6 years) produce language which is different prosodically and syntactically from their normal conversation when they are asked to "read" a favourite story book. Mediation is a more complex issue, as the same story book can be mediated differently by different teachers, parents or families. Wells (1981, in Teale & Sulzby, 1987) suggests that there is a quantitative difference in the amount of interaction, but also a qualitative difference. He proposes that some parents are more effective mediators and promoters of language development than others. This "eliciting style" has been examined by Ninio (1980) with high SES and low SES mothers, with the finding that low SES mothers were less skilled at eliciting responses. Similarly, Heath (1986) found marked differences in communication between Trackton, Roadville and Mainstream communities.

In Tizard and Hughes' (1984) study of preschoolers at home and at school, there were some noteworthy differences observed between teachers and parents which have important implications for curriculum design. The most outstanding difference noted is that parents play with their children, teach specific skills and impart a tremendous amount of information to their children. This information concerns the child's family, babies, household matters and also more general information about science, history and geography. In contrast, childcare workers talk to children about play and routines, such as picking up toys, listening attentively and following instructions. Tizard and Hughes (1984) conclude that children learn a great deal more in the "scaffolded" environment of the home, despite the inherent difficulties (other children, tired parents, lack of material resources), because of the personally relevant information communicated to the child and the one-to-one teaching.

Meadows and Cashdan (1988) propose their notion of "tutorial dialogue" as the means by which the child can experience one-to-one, personally relevant teaching within a classroom environment. Tutorial dialogue is based on the method developed by Marion Blank (1973) for work in a one-to-one situation for regular use with poorly functioning children. Teachers would see a child alone for periods of fifteen minutes. However, Meadows and Cashdan (1988, p. 58) have applied the method for use within the classroom, for varying periods across the day. There are eight major principles to "tutorial dialogue" for working with a child:

1. Teaching to an appropriate range of cognitive demands
    - not too simple or too difficult
    - to cope with different children's strengths and weaknesses (e.g. poor memory or expression).

2. Managing the response - use an array of techniques for poor answers, and try a series of simplifications, in order to put the question again. Matching the child's level and asking her to do slightly difficult things is important in the "scaffolded" relationship, for three reasons:
    a) match-mismatch theory of motivation and learning - a small extension is best for learning
    b) the child's idea of school, as a place where demands can be met, where teachers are sensitive to the needs of the child and interested in her as an individual
    c) the child's self image - encourage curiosity and liveliness, and to see herself as successful.

3. Developing a sequential theme and engaging in meaningful tasks.

4. Select appropriate materials, associated with the real tasks of everyday life - food, outings, washing, sleeping. Activities could include washing a doll, making biscuits, cutting fruit and so forth.

5. Checking the child's response - create real opportunities for sharing by using subjects or areas in the present context.

6. Pacing the session - create a higher demand at the beginning, helping the child to find answers. Ease the demand toward the end of the dialogue, so the child is left with a sense of success.

7. Giving the session shape:
    - a clear statement of intent, e.g. "shall we cut the apple and find out how everyone can have a piece?
    - draw together the threads of the dialogue, remind the child of the salient events and how answers were obtained.

Meadows and Cashdan (1988) suggest that many of these steps become automatic and normally teachers would concentrate on four major steps in the dialogue, which are:

1. deciding on an appropriate task
2. introducing the task
3. preserving the sequence
4. reviewing what has been done.

An intrinsic part of this dialogue is the use of demands and follow-ups, to maintain the coherency of the interaction. Simple demands which the teacher would make of the child are labelling, memory, description, non-verbal demands, imitation, incidental memory, delay and visual search. Harder demands are comparative analysis, cause and effect, imagery/prediction, means-ends relationships, higher level/logical relationships, rationale and word skills. Follow-ups involve attention getting-recapturing, through focus, delay and repetition. Follow-ups also include rephrasing, giving part of an answer, subdividing the task, helping to discard wrong or meaningless answers, presenting comparisons, giving information/demonstrations, asking for fuller responses, repeating a demonstration, relating the known to the unknown, directing action to learn significant characteristics, focussing on relevant features, and substituting action for verbal response.

This section has introduced the idea of an alternative curriculum for New Zealand childcare centres, based upon the Vygotskian notions of access and mediation in a scaffolded learning environment. Although this seems like a move away from the traditional focus of the "free play" curriculum, it is in fact only a reconceptualization. The provision of activities and materials would remain the same, as would the opportunity for children to move at their own pace within the curriculum. However, the role of the early childhood teacher changes by definition. Intuitively, I suspect that many very effective teachers are already providing a scaffolded learning environment for their children, and that they will identify their own behaviour in the stratagems suggested. The focus of this research will be to identify what the practices of parents and teachers are and how literacy is being promoted in New Zealand centres.

### A Literary Centred Curriculum

A literary centred curriculum provides one way in which the best attributes of a "free play" curriculum can be combined with a "scaffolded" teaching environment. Ideally the curriculum should be in the mind of the teacher, rather than in a written or structured form, thereby allowing room for spontaneity and creativity. A "scaffolded" learning environment provides greater opportunities for interaction between teacher and child, and also validates the mediation which effective childcare workers are providing.

In 1966, Marie Clay coined the term "emergent literacy" to describe the developmental continuities between emergent literacy behaviour and behaviour employed when the child is able to read independently. Clay's early research showed that children who couldn't read in the full sense of the word showed sensitivity to letters and word forms, appropriate directional movements, self correction and synchronized matching of spoken word units to written word units. She then concluded "there is nothing in this research that suggests that contact with printed language forms should be withheld from any five year old on the grounds that he is immature" (Clay, 1982, p. 22). By five, children display the prerequisite parts of reading, and display a knowledge of the form and function of print. Clay's research sparked enormous interest into how children learn the concepts of print before formal instruction, and how a child's developing knowledge of language and literacy can best by facilitated.

Recent literature on emergent literacy firmly states that it is necessary to provide a stimulating environment for early literacy activities, to which all children have access (Teale & Sulzby, 1987). If all children had some experience, in a culturally sensitive manner, of story book reading, questioning, discussion, drama, art, all the things which lay the foundations for literacy to develop, then perhaps the Government would not be spending millions on a Reading Recovery programme. It would make more sense to be putting more money into early childhood, than to be reducing standards and cutting funding. Open access to preschool care and education will not address social class or socio-economic differences to any significant degree, but it would ensure that all children had some experience of singing nursery rhymes; listening to stories, myths, legends; creating imaginatively via drama, art and musical play; all the skills which will be called upon in the school. It may be as simple as demonstrating a purpose for learning to read.

Wells (1985) states that all children, no matter what their background, use language in a wide range of ways. Difficulties arise for the child in a childcare centre because of the specializations of language which are used, such as "classroom language" and "literacy language". Wells suggests that social class differences in 'readiness for school' have less to do with language differences than they have to do with differences in activities related to writing and reading.

Most childcare centres would cite promotion of language and literacy skills as part of their curriculum, by the provision of materials and story time during each session. However, as Meadows and Cashdan (1988) demonstrate, few centres make a great deal of use of the opportunities which story time may offer. The Child Health and Education Study (CHES - in Meadows & Cashdan, 1988, p. 94) made a survey of all preschool centres in England and Wales on what materials and activities were provided in centres and how often. This study found that 95% of playgroups, 99% of nursery classes and 99% of nursery schools have a "book corner". With the same groups, 86% of playgroups, 92% of nursery classes and 89% of nursery schools practised story book reading to the whole group. Centres considered that provision of materials and story reading was "good practice" and yet the equipment was universally little used, with little spontaneity. As Meadows and Cashdan (1988) conclude, books are traditionally found at the periphery of the curriculum. Story reading is a quiet, passive activity and book corners are often used as areas to quieten distressed children. As van Lierop (1985) states,

> if story telling and reading were central to nursery and infant curricula, rather than a gesture at the end of the school day, children would be exposed to a wider range of vocabulary and linguistic structures, they would be awakened to the functions of literacy and the powers of imagination and concentration would be enhanced. If teacher and children were enjoying together the world of print, learning would take place. (p. 74)

The goals of fostering language development, social interaction and preparation for school could be achieved by centering the curriculum around the use of literacy materials; such a curriculum may also achieve the goals and aspirations of Te Kohanga Reo with the use of culturally appropriate material. The connection between early acquisition of literacy skills and later school achievement has a long history, and is too large a topic to be effectively covered here. However, a few examples seem to be of relevance to mention.

Durkin (1966) found that early reading was due to parental attitudes, mother's interaction with the child and the child's interest in becoming a reader. Similarly, Clark (1976) reported that the mother's attitude was instrumental in facilitating the child's early reading; where the mother was closely involved with the child's literacy activities, found the child to be stimulating companion and enjoyed the verbal interaction. In such homes, a richness of literacy experiences occurred, expressed by the parent's love of books and communicated by reading to the child at an early age. Both studies have important implications for children in childcare centres, as teachers can also facilitate a love of reading by providing a stimulating and interesting environment for the child to experience literacy within.

In order for literacy to develop, experience and learning need to occur in a meaningful context. Van Lierop (1985) reports the example of an early reader called Sonia, which provides the means by which a literary centred curriculum could be made meaningful. Sonia's early literacy was not grafted artificially onto her experience, but was woven into the fabric of her life. Story books were initially a stimulus, pleasure and comfort. Sonia moved from listening to stories, to picture books and finally to reading independently by the age of two and a half years. Sonia's play was intrinsically tied to current favourite stories.

Donaldson and Reid (1985) state that there are four principles regarding what is entailed in learning to read, which have relevance for the design of a literary centred curriculum:

1. Children come to school knowing a great deal about oral language, even though much of the knowledge is not accessible to consciousness in any way that would enable them to speak about it.
2. Children are hypothesis testers and rule users by nature.
3. Children have a strong drive to make sense of what they encounter, to understand what people mean when they speak and what other people's purposes are.
4. The ways in which language becomes meaningful are more subtle and complex than once supposed.

A "scaffolded" (Bruner, 1986) environment, wherein the teacher develops a literary theme, may provide a forum for such skills to be developed. Donaldson and Reid (1982) recommend reading aloud, as it helps to familiarize children with new, more complex linguistic forms, while the living voice helps to bring out the meaning with amplification and explanation if needed.

Meadows and Cashdan (1988) cite the work of their student Christianne Hayward as a way in which a literary theme may form a "free play" curriculum, in a rich "scaffolded" learning environment. Hayward selected a book of substance to read as a series over a two to four week period. Classroom activities were generated by the children's experience of the test; e.g. art, construction, role play, science and so forth. Hayward read Richard Adam's "Watership Down" and followed reading of the test with provision of appropriate jigsaws and puzzles, keeping a real rabbit, digging burrows in the sand tray, transforming a "wendy house" into a hill with a burrow underneath, and spontaneous re-enactions of the story line by the children. Testing following the use of this literary theme showed that the children had a greater knowledge of the concepts involved in learning to read, increased vocabulary, an interest in other stories later used as "themes" and books in general.

Martinez and Teale (1988) propose that providing a well designed library in a kindergarten or similar pre-school, with ready access, is an important first step towards establishing a literary centred curriculum. Such a library should have a healthy collection of stories, fables, poetry and informational books with a sense of multi-cultural sensitivity. Martinez and Teale (1988) suggested the following examples of how children used a library and selected books (p. 569):

a) book familiarity - books read by the teacher
b) degree of familiarity - repeated readings give control over organization of text
c) structure - predictable plots with repetitive, cumulative or rhyming patterns.

Strickland and Morrow (1988) claim that creating a "print rich" environment is one way of promoting literacy development. They recommend a library centre in pre-school classrooms; with ready access but also a degree of privacy and tranquillity, to accommodate five or six children. Comfortable seating, pillows and tables will provide opportunities for settling and enjoying a library corner. A revolving supply of books, multiple copies of favourites and a library "check out" system may maintain interest. Having personally experienced such library set-ups with New Zealand playcentres, there is a definite place for such a system in a pre-school. As long as there are plenty of books with loads of variety, children seem to enjoy the "adult" privilege of selecting and taking home their "reading" books. Morrow (1989) states that well designed classrooms significantly increase the number of children who choose to participate in literacy activities.

Another method of promoting literacy development is proposed by Strickland (1989) who designed a "core experience curriculum". This curriculum integrates language and literacy in a holistic manner using content themes. Strickland suggests that a print rich classroom is essential, with meaningful labels, signs and captions at child level. A strong literature base is a hallmark of this curriculum, as is an environment which invites children to write, read and talk.

The design of a classroom plays a significant role in the success of an emergent literacy programme, as positioning of literacy activities and provision of appropriate materials are particularly important. Teale, Sulzby and Kamberelis (1989) found that an emergent literacy curriculum should provide opportunities for multimedia construction - putting painting and writing areas side by side. Children can be encouraged to publish their own books or exhibitions. Likewise, children should be encouraged to write "stories" before formal writing is achieved, and to share these stories within a small group. Teale, Sulzby and Kamberelis (1989) conclude that classroom libraries, letter writing, name writing and artwork should be encouraged. Similarly, van Lierop (1985) suggests that children can collectively make booklets, centred on their own activities. Such booklets are of high interest and predictability, creating a motivation for reading. Hall (1976) states that as children see their spoken thoughts put onto paper, they can understand the nature of reading and learn to associate spoken words with written language.

Learning within a literary theme may become relevant because it creates a context for play. Learning language and literacy skills will be enhanced by the mediation of the text and subsequent activities by the teacher, conducted within the children's group and providing opportunities for social interaction. As Donaldson and Reid (1985) conclude,

> children - and indeed adults much of the time - do not interpret the words alone. What they are basically interested in is to understand what people mean, rather than what words mean. They interpret the words in their setting - both the physical and personal setting - to such an extent that we may speak of the language as being embedded in its context. (p. 15)

## Conclusion

This paper has attempted to explore the theoretical roots of the prevailing tradition in many centres of the "free play" curriculum. A contrast is seen between the predominantly "free play" curriculum of Kindergarten, Playcentre and Childcare centres, and the more structured curriculum of Te Kohanga Reo. A Piagetian tradition of the notion of the child as an active learner was seen to be underpinning the "free play" philosophy. The teacher's role in such a curriculum is to provide, select and arrange materials and facilitate a child's interaction with these. The importance of interaction between teacher and child in a learning situation is secondary to the child's own exploration and discovery.

An alternative, literary centred curriculum is proposed as the means by which the child's learning may be "scaffolded", and the child's progress monitored. A Vygotskian model of access and mediation defines the teacher's role within such a curriculum, wherein the teacher provides a scaffold or bridge across the child's zone of proximal development, helping the child to master new skills. Such a literary centred curriculum may achieve the goal of preparing a child for the language and practices of the classroom, while enjoying the positive benefits of a well designed "free play" environment.

Intuitively, most good childcare workers probably combine elements of "free play" with appropriate "scaffolding" to help children reach their full potential. Dangers arise in centres where workers do not believe that they have a curriculum, by not recognising the part they play in selecting and mediating materials for children. A literary centred curriculum may provide a focus and important purpose to the early education of our children. For too long, the play of children in childcare centres has been undervalued and has been seen as unrelated to the formal instruction which follows in school. This research will hope to demonstrate that early childhood education is not a luxury or a form of parental neglect, but a valuable opportunity to ensure that all of our children have access to a literary environment, which is mediated in a culturally sensitive and meaningful manner.

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# A PHILOSOPHY OF PRACTICE IN INFANT/TODDLER CARE

## A CASE STUDY OF MAGDA GERBER AND 'RIE' (Resources for Infant Educarers)

Paper and workshop presented to the 5th Early Childhood Convention, Dunedin 1991.

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**ABSTRACT**

The work of Magda Gerber and RIE has become well know in the United States as a philosophy of practice in the care of infant/toddlers which emphasises observation, respect, free movement, autonomy and selective adult intervention and handling. Magda Gerber trained and worked at the Loczy Institute in Hungary under Dr Emmi Pikler, whose pioneering work in childrens' growth and movement, and its application in residential childrens' homes has become highly regarded. In 1990 I was fortunate to be able to train for my Level One Certificate with Magda Gerber at the RIE Institute in Los Angeles, and as part of this training was able to visit a number of infant/toddler centres who were using RIE philosophy as the basis of their organisation and childcare practice. With the expansion and direct funding of under two programmes in New Zealand, and the emergence of training programmes for this age group, it is opportune to examine the rationales that underlie provision and practice.

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| Part One: | Presentation of paper |
| Part Two: | Viewing of videos from RIE by Magda Gerber |
| | *Seeing Infants With New Eyes* |
| | *See How They Move* |
| Part Three: | Discussion on the challenges of Magda Gerber to infant educarers in NZ |
| Part Four: | Viewing of some resources from RIE |

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Videos, books, tapes, magazines and training information are available from:

Resources for Infant Educarers
1550 Murray Circle
Los Angeles
California 90026
USA

> Our goal is an authentic child - one who feels secure, autonomous, and competent. Our method, guided by respect for the infant's competence, is observation. RIE trusts the infant to be an initiator, an explorer and a self learner. Because of this basic trust, we provide the infant with the minimal help she needs to overcome an impasse and allow the child to enjoy mastery of her own actions.
>
> Magda Gerber (1984:1)

## INFANT/TODDLER CENTRES

Formalised group care for infants and toddlers in European society began in the foundling hospitals of the eighteenth century. The aim was to get abandoned babies off the streets and to keep them alive. The quest spawned early research into the development and well-being of young children in group care, but the early consensus of opinion was that very young children had a better chance of survival out of the institution and in a home (McClure 1981; Hardyment 1983). Daycare programmes which began in the 19th century often included infants and toddlers, but the charitable and welfare focus of most programmes kept them apart from early childhood education developments of the time. The growth of mass early childhood care and education programmes throughout this century has had a predominant focus on the preschool age child, and most educational discourse on the well-being and development of young children in group programmes has had a preschool educational rationale. Since the 1970's there has been a growth in programmes which cater for infants and toddlers as part of a downward continuum of early childhood education which can now begin at birth. Like the foundling hospitals before this has generated a new wave of discourse and research concerning group care for infant and toddlers, however, the concept of an infant/toddler programme with its own distinctive philosophy of practice is new and still emerging (Gerber 1979; Honig and Lally 1981; Cataldo 1983; Van der Zande 1986; Stonehouse 1988; Gonzalez-Mena, J and Widmeyer Eyer, D. 1989).

In 1990 18% of children in Aotearoa/New Zealand under the age of 2.5 years were attending early childhood services (Gardiner 1991). The increasing participation of women with infants and toddlers in the paid workforce was a reason, but so too was the growing knowledge of the benefits of early childhood education for children of all ages and of the support it provides for families. Some infant/toddlers were incorporated into programmes primarily designed for older children but there were increasing numbers of centres catering specifically for infants and/or toddlers. In the 1970's universities opened creches with a strong educational focus which included separate programmes for infants and toddlers, and in the 1980's Nga Kohanga Reo were anxious to recruit Maori infants who would be developmentally receptive to the early transmission of Maori language and culture. Centres now have a wide range of programmes for this age group: full day, sessional, homebased, early intervention, programmes that include parents and others where infants and toddlers are in the care of others, mixed age and separate age arrangements. Early childhood training, however, has only recently addressed the special needs of infants and toddlers.

From the late 1970's field based childcare training and one year childcare pre-service programmes offered basic level training with some focus on infants and toddlers. In the late 1980's the New Zealand Childcare Association and the Advanced Studies for Teachers Unit offered post basic modules for people working with infants and toddlers and the Colleges of Education began three year pre-service early childhood training with specialist courses on group care for infants and toddlers. New Zealand research on the care and education of infants and toddlers in centres has been non existent until 1990, when the New Zealand Council of Educational Research undertook to examine the different styles of infant/toddler provision in a range of childcare programmes (Podmore and Craig 1991). The development of a distinctive and clearly articulated philosophy of practice for infant/toddlers in group care in New Zealand is, however, still emerging.

## EMMI PIKLER AND MAGDA GERBER

In the United States the work of Magda Gerber is highly regarded by practitioners in infant/toddler programmes and educationalists involved in the training of caregivers. Gerber argues for an approach to infant/toddler care which emphasises observation, respect, free movement, autonomy and restricted adult intervention and handling (Gerber 1981). She sees this as different to other infant/toddler programmes where the emphasis has been on the nurturing - mothering aspects and/or on cognitive development (Honig 1974). Gerber (1979:51) explains:

> Professionals attempting to meet the infant's needs for a nurturing environment might seek to provide a higher adult-child ratio, more body contact between the care-giver and child, and more rocking chairs; those following the cognitive model would buy learning 'kits' and develop curriculum aimed at teaching and stimulating the infant.

The rationale underlying such programmes arose from concerns about the ill effects of raising young children in group care, and notions of the 'competent infant' who could learn more by heightened stimulation (Stone and Smith 1973). Gerber promotes and practices different ideas on infant/toddler care at her 'Resources for Infant Educarers' (RIE) Institute in Los Angeles, where she runs classes for parent and their infant/toddlers and training programmes for practitioners who work in childcare centres. Gerber emphasizes the infant's need to spend uninterrupted peaceful time following their own biological rhythms, and maintains that infants should not have to adjust to external schedules and expectations. "We try to reassure our parents that infants *do* do what they *Can* do - and should not be expected to do what they are not ready for" (Gerber 1984:2). Her RIE methodology, as it has become known, has been developed over many years in the USA working with infants, parents and caregivers, but Gerber attributes its philosophical foundations and methods to Dr Emmi Pikler (1902-1984) from the Loczy Institute in Budapest Hungary, where Gerber herself trained and worked until her arrival in the USA in 1957.

In prewar Hungary, Pikler was a pediatrician, with an interest in the physiology of gross motor development as it occured in healthy infants who were neither restricted or taught. This was in contrast to infant motor development which was assisted by teaching, propping up, positioning, or restrained by harnesses, walkers, bouncers etc. Pikler came to believe that, not only did free and unhurried motor development enhance a child's motor skills, but that a non interference approach by adults (i.e. letting the child develop at its own rate) also enhanced their social, emotional and cognitive growth (Gerber 1979; Pikler 1972). After the war Pikler founded the National Methodological Institute for Residential Nurseries in Budapest, known as Lozcy,[1] which has provided a home to some thousands of under three years olds. Loczy has also been a centre of research on infant/toddler care development and the cradle of what has become known as the Loczy philosophy. Pikler (1979:2) describes the techniques:

> ...Our children have never been taught to perform certain skills which are generally taught.....The infant in never put in a more advanced position in order to promote gross motor development, than he is able to attain by himself from a basic supine position. His attention is never drawn to a toy by placing a toy in his hand, or having it dangle over his head, thus compelling him to notice it. ...As matter of principle, we refrain from teaching skills and activities which under suitable conditions will evolve through the child's own initiative and independent activity. Naturally we must provide the children suitable conditions - that is freedom for activity and adequate space. Their environment must be stable, varied and colorful.

The Loczy adult holds back from unnecessary intervention in a child's play. Instead the focus of adult - child interaction is during times of physical caregiving such as dressing, bathing, feeding, toileting etc. Pikler insisted that these times be individualised, interactive, unhurried, and there should be only a few regular adults interacting with each child (Pikler 1979). This emphasis on caregiving as the curriculum for adult-child teaching and learning is a different approach to the traditional focus of early childhood education, where adults have concentrated their intervention on interaction in children's play. Caregiving has been less valued as a learning medium, often with lesser trained staff performing such functions or with fewer staff on duty at these times.

In contrast to the evidence of the effects of maternal deprivation on young children reared in group care (Spitz 1945; Bowlby 1951), Loczy babies were described as 'alert' 'autonomous' and 'exploratory' (Gerber 1979). There are five key principles underlying this Loczy philosophy which Gerber applies to her own work and teachings on infant/toddler care:

Summarised from Gerber (1979)

**Predictable Environment:**

An infant living in an institution derives security from a predictable and stable environment. There are long periods of uninterrupted play from which the child can anticipate what daily routines will happen next.

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[1] Named after the street where the Institute is located in an old private house and gardens.

**Intimate Stable Relationships**

Each infants needs to develop a relationship with one stable caregiver and at Loczy or any other setting staffing arrangements must facilitate this.

**Individualised Care Activities**

The caregiver gives individual unhurried attention during routine caregiving activities. This interaction develops trust and intimacy and child is more able to explore autonomously without adult intervention. In all interactions the child is encouraged to be an active participant rather than an passive recipient.

**Respect**

Respect for the infant as an active autonomous person guides all interaction. Some principles being:

- Children are never talked about in the third person
- Infants are never forced to do anything. ie. food is only put into an infants mouth when it opens its mouth.
- Nothing is ever done to the infant without telling it first and if a choice is given the infant's choice is respected.

Respect too is given by trusting the infant to solve problems and in times apart from caregiving routines there is selective intervention only. The emphasis for the caregiver is on when not to intervene - observation being the key.

**No Teaching**

The Loczy philosophy emphasises that gross motor and sensori motor development are best learnt in a free, safe and carefully designed environment and the child is never placed in restrictive equipment. To quote Pikler (1971:51):

> The Institute withholds 'teaching' in any form. Under 'teaching' we understand systematic practice of certain motor skills by holding or keeping the child in a certain position, whether by adult or equipment, or in any way helping him to make movements that he is not yet able to execute by himself in his daily life.

They are given toys and other play material of appropriate quantity and quality which they can use spontaneously, on their own initiative. Staff are always present and available but observing and maybe encouraging but not necessarily intervening.

An important feature of the Loczy and/or RIE model of infant and toddler care is to group children according to their developmental motor skills rather than in inter age arrangements. The goal is independence meaning, "We allow and encourage them to *do* what they can do, to resolve some of the age appropriate problems they will encounter" (Gerber and King (1985). As such the play environment is carefully designed around the developmental skills and challenges of the age level i.e. supine infants, crawling infants, standing/toddling, running/toddling.

Gerber is now in her eighties, but in 1990, along with her extensive training programmes was still running a parent-child play programme in the playroom attached to her home overlooking downtown Los Angeles. For each session the room is set up according to the developmental skills of the group of children coming. Over the two hour session the parents are encouraged to sit back, be available but to let their children play freely. To begin with parents find this hard to do as the urge to assist and stimulate is very strong. Infants too, may find it hard to be less dependent on adults when this has not happened at home. Gerber has an assistant, usually a RIE trainee, who models appropriate and selective intervention while Gerber talks with the parents, using whatever happens during the sessions to guide and support parents in the way they handle and interact with their children.

It is the parent - child relationship which is the primary focus of Gerber's work, but the RIE philosophy and methods are being applied to a growing number of childcare centres catering for infants and toddlers. Given RIE's origins in the Loczy philosophy of group residential care for infants and toddlers, it seems an appropriate approach that is well grounded in practice and research, even though it appears to be moving in a different direction from the mainstream discourse of early childhood education - ie. adult intervention. Gerber is critical of infant toddler centres in the USA despite the many well meaning and caring people who work in them. "Though many centres have some guidelines, few have developed a working philosophy and a methodology to go with it. Consequently the caregiver acts according to his/her own beliefs and background" (Gerber 1981: 28). Low salaries, few training opportunities, poor building design, inadequate adult infant ratios, and little parent awareness on what they should look for or demand, means according to Gerber, that most centres cannot meet the needs of infants. These criticism would also apply to New Zealand centres, although the increased funding subsidies for under two's in childcare centres from the *Before Five* policies[2], along with new training opportunities may give us more resources to meet the challenges of infant/toddler care than is available in the USA. There is still, however, Gerber's challenge regarding the need for a "working philosophy and methodology". This is something we have not articulated.

## NEW ZEALAND PERSPECTIVE

The strongest influence on our Pakeha infant centres is uniquely New Zealand - that is the Plunket - Karitane philosophy first formulated by Truby King. These entwined services were, for many years, providing the only training for work with infant and toddlers, although in homes not centres, and from a health not an educational perspective. This influence also stems from the fact that over the last sixty years most pakeha mothers have taken their babies to the Plunket nurse. The heritage of Plunket care is deeply inculcated into pakeha culture and the everyday practices of childrearing. With the growth of centre programmes for the under three's many ex Karitane and Plunket nurses have found positions in childcare centres. They have been keenly sought after even though their training did not address group care or the educational development of young children. The Plunket - Karitane philosophy of practice can be described as loving, but firm with an emphasis on routine and kindly discipline and a keen attention to health and hygiene issues. Given the Plunket ideal of mothers at home the emphasis is on creating a substitute mother figure, but such mother figures are caught between an ideal of one to one interaction as in a home, and the financial constraints on staffing ratios in a centre. The compromise is managed through adult imposed routine and order so that each child gets their turn and entitlement.

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[2] The 1991 budget cut this subsidy by a third

The Plunket - Karitane influence in the childcare centre with its roots in health and welfare, has converged with another strong early childhood influence - that is the Playcentre ideal of learning through play. Considerable numbers of ex Playcentre trained staff also work in childcare and often with babies. These recruits have played a major role in freeing up the regimented programmes and routines that have characterised childcare centres and Kindergartens. The different training backgrounds, however, between Plunket - Karitane and Playcentre are particularly evident. Playcentre philosophy and practice is preschool oriented, but its family approach and its focus on play and stimulation is relevant to the younger age. In contrast, Plunket - Karitane acknowledges and addresses the special needs of infants and toddlers but with few frameworks that can guide group care programmes, or with few notions of continuity between infant, toddler and preschool age learning. Plunket protectiveness and Playcentre's creative disorder can become the extremes of a spectrum, that has not yet merged into a consistent philosophy of practice for the group care of infants and toddlers. One area of consensus between Plunket - Karitane and Playcentre concerns the role of mothers. Both parent organisations have promoted an ideal of mothers at home, and their respective trainees often display attitudes of concern for infants in childcare who are separated from their mothers. The attitude being, "If mothers can't or won't be with their babies we can do the job best". The emergence of caregivers who are positive towards the idea of group care for infants and toddlers and who affirm parents in their choice or need for this style of childrearing, is only beginning.

Programmes for Maori infant/toddler within the Kohanga Reo are beginning to articulate such a philosophy of practice. The rationale has neither a Plunket or Playcentre heritage. The cultural priority of the transmission of Maori language to the infant within the whanau is the focus. The spiritual and ritual values of the marae and its people are the dominant influence. The physical environment, the whanau, the curriculum and caregiving practices are part of an carefully designed holistic whole. In this sense the Kohanga Reo model with its own training, rationale and clearly articulated methodology of practice is probably the nearest we have in New Zealand to an emerging "Working philosophy and methodology" for infants/toddlers. This is not to advocate it as being the most appropriate or better, but like the very different RIE and Lozcy models, there are clear goals, principles and rationales that underpin practice. The formulation of such goals , principles and rationales should be the essential forerunner in the establishment of infant/toddler programmes. Our approaches at present are well intentioned but piecemeal, although the NZCER Infant/Toddler research findings may give a clearer overview.

## A LOS ANGELES OBSERVATION

Around Los Angeles/San Fransisco there are a growing number of centres who advertise a "RIE influence" or advertise for "RIE trained" staff, and there is one centre officially affiliated to RIE - The South Bay Infant Center run by Ruth Money. I was fortunate to visit this centre as well several others whose staff had RIE training and/or whose organisation was based upon RIE principles. What I saw was very different to anything I had experienced in New Zealand which challenged my own preconceptions of what constituted a quality environment for infant/toddlers. The South Bay Infant had 12 children under two, who were divided into three groups, toddlers, crawlers and non crawlers. Each group had a playroom and a primary caregiver who would be relieved for breaks by another familiar person, but who stayed with the same group of children throughout their time at the centre. An immediate impression on my morning visit was one of tranquility with relaxed staff and contented infants, despite a 1:4 ratio which does not match the NZ recommended quality ratio (Ministry of Education 1989)[3]. There was not a lot of equipment but each environment was carefully designed to meet and challenge the developmental level of the particular group. None of the play equipment depended on adult intervention. For the non crawlers, large blow up balls and squares of coloured cloth were play things that were always responsive to the infants movements. For the crawlers, mattresses on the floor and wide wooden ramps at gentle slopes on the floor were popular. The toddlers had a much wider range of playthings with steps and slides and space to run. Equipment for feeding and changing for this age was carefully designed to allow the child to be as active as possible. There were no high chairs or changing tables. Chairs were low and could be moved by the toddler and there was a changing table which a toddler could get onto itself and for wet napkins did not even need to lie down.

For the most part the staff of the younger groups sat on cushions against the wall observing, responding verbally when infants looked at them for approval and giving physical and emotional comfort when infants came and sought it. The only interventions occured when two crawling infants got physically tangled in a corner, or a child needed to go to bed. The children were all individually fed in arms and to ensure uninterrupted time for this the feeding chair was put in a playpen. The other children would crawl up to the playpen but had learned to wait. Staff spent time observing the children and knew exactly when and what intervention was appropriate. Staff and children knew each other very well through observation and the provision of a trusting predictable environment. There were very few occasions when the children cried and if it happened the staff did not immediately intervene as we would do. If the child sought verbal or physical assurances it would be given; sometimes the child cried and stopped without seeking intervention and staff would always watch for possible discomfort. As Gerber (1979:100) writes:

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[3] The 1991 budget cuts removed the Ministry's quality standard as a requiremen for receiving funding.

> All healthy babies cry. We would worry if they didn't cry...To follow the advice "Don't let your baby cry" is practically impossible. At times the harder a mother or father tries to stop the baby's crying the more anxious they become...Do not want to stop the crying. Respect the child's right to express feelings, moods whether crying or smiling. Try to find out and eliminate discomfort. What will determine the baby's feelings of trust are the security in the child's daily life...If the child's life is very hectic and unpredictable, then the only secure base is the parent....Its not only what you do when the baby cries, but what you do all the time when the child does not cry.

In this sense the emphasis was on creating an atmosphere which reduced levels of stress and distress, rather than having a lot of staff available to physically comfort infants whom it is assumed may be distressed..

In this centre there was a clearly articulated philosophy of practice which guided all decisions. The challenges to me were that firstly, respect was given to children in every interaction. Secondly, children were autonomous, curious and active but not dependent on adult attention. Thirdly, staff were relaxed, always available and knew the value of observation. Fourth, the children were not restrained or limited in their body movement neither were they ever assisted, and the body movement of those children was beautiful. Fifth, in comparison to New Zealand centres I know, there was much less equipment and a 1:4 staffing ratio was more than adequate. I came away knowing that we over handle, and over stimulate our babies with too much adult attention which wears out the adults and makes the infants dependent rather than independent. Our criteria of quality has been to give infants more and more adult attention and whether we reach a 1:3 or even a 1:2 it is never seen as sufficient to meet what we perceive to be the child's needs.

## PERSONAL CHALLENGES

The major challenge from my RIE training and observations in centres was a new awareness and re evaluation of:

The needs of infants/toddlers

The role of adults in meeting these needs

There was also a clearer consciousness of the notion of a philosophy of practice. Coming back to New Zealand I began to plan for a third year university course on specialist programmes for infants and toddlers[4] with a focus that went beyond child development, practical knowledge and regulatory requirements. While these are necessary they become fragmented parts unless part of a more holistic approach. We therefore, began with the requirement priority for each student to develop and articulate a philosophy of infant/toddler care that fitted within defined parameters of quality, research knowledge, industrial conditions, regulation, and some consensus views on infant/toddler needs. Each student then moved into the preparation of a 'Report to Management' which was a proposal for the design, curriculum and management of an infant and/or toddler programme that would articulate a philosophy of practice. The Report had to contain a research overview on issues of quality and a theoretical justification for the specialist aspects of infant/toddler programmes. It then covered in some detail such aspects as: building and outdoor design, environment, curriculum objectives, equipment, staffing schedules, budget, daily - weekly programme plans, parental role, staff guidelines, evaluation criteria etc (May, Mitchell, and Dowson 1991). Students found this an overwhelming and at times stressful task as we were uncompromising regarding the academic standard it had to meet. Most had had some experience working with infants or toddlers but the exercise was inevitably a theoretical rather than a practical challenge. On the other hand, reports that did not provide sufficient rationale and guidelines for practical implementation were marked harshly. Not only did the students have to integrate ideas, readings and teaching from all their previous courses,[5] but they came to realise that the parts could not operate separately from the whole, which had to begin with a personal philosophy. It is important that our future teachers/caregivers be able to articulate a philosophy and apply it (in theory at this stage anyway) as a methodology. The Loczy and RIE philosophies were used as case studies, were very attractive to students and impacted on their ideas, but we also took a broader view. For some students cultural issues were to the fore, for others the ideas of a particular developmental theorist were paramount, and for many there was a diverse discourse threaded through their philosophy.

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[4] The course Specialist Programmes has two 50 hour modules. 'Programmes for Children with Special Needs' which was developed by Jill Mitchell and 'Programmes for Infants and Toddlers' which I developed. Following on from this course is one entitled 'Programmes and Evaluation' written by Margaret Carr and myself in which students develop a programme for

I hope in the years to come as some of these students work with infant/toddlers, that they articulate a sound philosophy of practice in their interaction; that they see beyond everyday methodology and practice to understand and critique the rationale and philosophy of the centre programme; and that they eventually can take responsibility and manage a programme. And although I don't intend to say that RIE is the best and only way to care for infant/toddlers, I hope most of all that our students have been challenged to regard and handle infant/toddlers with respect.

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preschool age children, as well as looking at frameworks for budgeting, administration and evaluation.

[5] One of the integral themes which all courses must address at the Centre for Early Childhood is Infants and Toddlers, and course outlines must show how and what will be done.

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# To develop the child's understanding of the surrounding world.

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This presentation will be focused on a current research project aimed at developing a new approach to learning in the years around starting school. The project was begun in 1990 and will continue for another two years. The theoretical perspective, aims and methods will be presented, as well as a brief summary of my observations of the teacher's work from the first year.

## Background - educational perspectives

Looking at what is going on in preschool nationally and internationally, one can distinguish different approaches based on different theoretical views or assumptions about children's learning and development. These disparate approaches also represent different goals and methods.

Firstly, we have the kind of preschool programme which focuses on the *child's activity as such*, that is, the child's play. In this case, the preschool is supposed to provide children with material to work with, and to give them experience which will be the basis for and content to utilize in play. The assumption is that there is a need in the child to work on their experiences. The psycho-analytical theory is seen behind this approach. The development of every child will emanate from its own experience.This means that the programme has to be totally *child-centred*, with no or very little intention to influence children's learning. Consequently, the activities in preschool become unsystematic, and the goals are often presented in general terms such as "learning to co-operate", "to develop social skills" (how to behave), "develop creativity" and "communication skills", etc. To summarize, from the child's experiences he or she is expected to devote him- or herself to being active and to manipulate with the concrete world. To follow this "natural child" is what preschool seems to be all about (Sylva et. al, 1980). To evaluate this kind of programme is almost impossible.

A second approach in preschool is the view developed by *Fröbel*, in which the *child's general skills* in terms of logical - mathematical thinking are looked upon as the long-term goal. In the Fröbelian view, divineness and logical - mathematical thinking are related. The child is viewed as progressing via general development stages, and as each sequence of development can be predicted, material can be provided supporting the development at a specific level. *Montessori* , with her view of "sensitive periods" which could be worked on with concrete material, also developed by her, is an example of this approach to learning (Montessori, 1917). *The High/scope programme*, based on the Piagetian general stages, is another example of this view. The High scope approach focuses not only on concrete work with materials; the theoretical view is also based on the notions claimed by Piaget as central to developing the child at each stage to finally reach a logical-mathematical thinking as the most advanced way of thinking. Developing general thinking skills is looked upon as the best basis for later learning in school. (Rye, et.al. 1987). Fuerstein (1987) has dealt with work on children's general intellectual skills by teaching them technical skills. He claims that developing children's technical skills not only makes them better learners in school but the method also helps to develop their intellegence in general. Shayer (1988) made a close replication of this kind of study, but showed that skills from one domain did not transfer to another. This is in line with most newer research in the field of learning, where many claim that learning is content - and context-dependent (see e.g. Hundeide, 1989; Marton, 1988; Greeno, 1988).

The third kind of preschool programme to be reviewed is the one focusing on *specific knowledge*. Here the child's learning of the *subject matter* is placed at the centre. The assumption is that there is a specific body of knowledge, such as the alphabet, figures and other facts, that the child must be supplied with before being able to learn in school. The *teacher structures* exercises with a clear intention to teach children specific things. An excellent example of this is the huge number of "before school books" available on the market.

*Memorization, repetition and exercises* are key notions in this traditionally school-oriented approach. The view seems to lean on an idea that children become best equipped for school learning by doing similar things in preschool to the ones done later in school, but at an easier level. A lot of material formerly used in primary school is used in preschool nowadays (Elkind, 1988a).

This kind of preschool programme can be easily evaluated with traditional tests. For example, a child either knows or does not know the different letters, or is able to count to 20 etc. However, all evaluations made on the effects of preschool programmes show a similar trend, namely, that children who have been involved in the most school-like and teacher-structured activities are the ones who are the least successful in school (see e.g. Weikart, 1989; Osborn & Milbank, 1988; Gordon, 1987). Children involved in this approach to learning seem to be forced into a formal way of learning that they are yet not ready for.

Looking at what is going on in preschool all over the world today we can observe one line pointing towards "the natural child", one which we in preschool had better not interfere with. The other obvious line is towards exerting a systematic influence by concrete manipulation with materials or by transmitting abstract knowledge to children. The theories underlying some programmes are similar. For example, the Piagetian theory is used both to support the direction towards "the natural child" and the generally structured High/scope programme (Forman & Fosnot, 1982). This means that the view of child development is only one aspect underlying a programme, or maybe it is only used to inspire a programme. Sylva (1986) says that the content of the programme comes from other sources such as the values of the society and the teacher's professional experience.

The general trend in societies all over the world seems to be towards lowering the school age, which most often means putting younger children into formal teacher-structured learning situations. Elkind (1988b) talks about the harm that early instruction can make on motivational, intellectual and social aspects of the child's life and later learning. He also claims that preschool children do not need to be taught learning skills, nor do they need to be taught specific contents from different disciplines. "The task of early childhood educators is to provide the material upon which children can employ their skills. They also need to give children the labels to go with the discriminations they are making"(op.cit. p. 107).

In this paper I will try to give an alternative approach to learning in preschool. *What is it we ought to provide children with, and what kind of labels are basic to learning at these ages?*

## An experientially oriented approach

In the Russian activity theory it is presupposed that children's thoughts are framed in relation to the activities they take part in, in their society (Davydov, 1988). This means that *thoughts are looked upon as content - and context-dependent* (Säljö, 1989).

Hundeide (1989) calls this phenomenon developing a structure of relevance in the child's thinking. This means that the child perceives situations, tasks, problems, people, objects, etc., according to experiences which are relevant in relation to the child's life-world. The child's actions are determined by what appears as meaningful to it. If you take the children's perspective and see how they experience the world and relate themselves to different phenomena, it becomes obvious that you can not separate the children's cognitive capacity from the world around them, that is, from the content and context the child is a part of (Pramling, 1989). Children's personal history is created by the purpose experienced. It is the child's experienced reality that forms their world of thoughts (Merleau - Ponty, 1962). Within the field of phenomenology, the notion "lived-world" is used for the children's concrete experiences as these appear in their consciousness. What characterizes this notion is that there does not exist an internal subjective reality distinguished from an external objective reality. There is just one reality, an experienced and lived reality. And the reality is subjective and objective at the same time.

How children see, conceptualize, experience or relate themselves to the world around them is a question of their consciousness.In the field of phenomenology, conciousness is seen to be expressed by intentionality.

Josefine (17 months) is sitting on the floor with a specific kind of children's book in one hand. With the other hand she is poking around in a pile of books. She finds another book of the same sort as the one she is holding in her hand. She sits for a while looking from one book to the other, totally occupied. After a while she puts both of the books on the floor, stands up and places a foot on each book, smiling.

What is it that Josefine is experiencing? She cannot articulate that the books make a pair. She does not have the notion of similarity, nor she is able to say the word "two". It is obvious, though, that she experiences that these two books are similar, a pair, two. She herself has got something in common with the two books, a pair of legs, and she demonstrates this.

This is an example of how the child's experience is more fundamental than knowledge and skills. Many children develop their awareness of different aspects of the surrounding world by themselves, other do not. But since the assumption of this approach to preschool education is: *how different aspects of the world around them are experienced is more basic than skills and knowledge, this ought to be the goal to work for in preschool.* To raise the level of the child's awareness means to make the world more transparent, to influence the senses through which it experiences the world.

*To take the child's perspective means focusing on the whole child in its environment* . The emotions are subsequently undistinguishable from the child's thoughts. The most fundamental principle in the field of child development is that a child is born with a capacity to experience the world around him, and with a capacity to adapt to these experiences (Hundeide, 1989).

Young children learn about objects by looking, touching, pulling, throwing, hammering, smelling, tasting, feeling etc. In other words, they experience the objects from all possible views,with all senses. When the older preschool children are on their way *to dig into the world of ideas*, they ought to get the same opportunity *to turn these ideas back and forth and to experience the variation in the ways of thinking*.

Let us look at an example of how 5- and 6-year-olds experienced a phenomenon such as growing and feeling well. The question put to the children was: What do children need to grow and feel good? In the group of 10 children one could see that the children focused on a variety of aspects.

1. **Material things,** such as somewhere to live, a bed, clothes, things to play with etc.

**2. Nature,** such as food or air to breath. Someone also talked about nature as a source of experiences, that is, "one needs to smell the flowers to get a feeling of well-being".

**3. People,** the reason for them varied. Some children spoke about parents as someone who has to see to *the child's food and clothes*. Other children saw parents as somebody to have an *emotional relationship with*, expressed as "someone to hug and get consolation from". Finally, someone expressed the need for parents as a guide in everyday life. This child told the interviewer: If I as a child find berries in the forest, and my dad knew that these particular berries were poisonous, he could warn me and prevent me from tasting them" (Pramling 1991b).

What a child needs in order to grow and feel well is a question concerning the child's understanding of himself and others as physical, psychological and emotional human beings. Nevertheless, it is a cognitive question, that is, a question about a content which can be the focus of children's attention on which children can reflect in many different settings to raise their level of consciousness.

Children's different ideas of what one needs in order to grow and feel good could be visible to children via drawings, drama, discussions, symbols etc.

The approach adopted in my present research project is based on earlier research. In Pramling (1989), children's conception of their own learning have been developed while they worked on developing their understanding of different phenomena in the space of one school year. They partly worked in line with the educational principles which will now be further expanded in this project. In a learning task at the end of the year, it was shown that children who had been involved in the experientially oriented approach, in comparison with children who had been involved in more traditionally designed programmes, *became better learners*. To become a better learner means to understand a phenomenon at a qualitatively higher level - to see other kinds of connections. Within that project they also worked on a specific content "The shop" (Pramling, 1991a), where children's understanding of specific economic aspects was developed with guidance from an earlier study where children's thinking about the content was described (Pramling, 1986). To sum up, the above study showed that children who have participated in the experientially oriented approach for one year developed not only cognitively in their capacity to understand meanings, but also metacognitively by developing their conception of their own learning (Pramling, 1989). The experientially oriented approach has a "what aspect", a "how aspect" and a metacognitive aspect, which will be further developed later in this paper.

## The purpose of the research project

The purpose of the project is to:

1) Develop a theoretically and scientifically based "curriculum", since theoretically based ideas are applied in practice.

2) To systematically describe what happens in the groups when these ideas are applied.

3) To work out an internal evaluation, that means, evaluate children's development in preschool in relation to the content they work on.

4) To evaluate the meeting with primary school for 50% of the children.

## The design and method of the project

*During the first year* six preschool-teachers have been involved. They work in three different day-care groups and three part-time preschools located in different social areas of a large city. All six teachers are very experienced and have shown a great deal of enthusiasm for participating in the project.

The teachers have met once a month with the project leader. At every meeting a specific content has been introduced, such as, for example, children´s development of number conception, ideas about reading and writing, children´s thinking about aspects of natural or social science, ideas about learning, interviewing children, etc. Research results referring to different contents in relation to children´s thinking have thus been presented to the teachers. They have then gone back to their groups of children and tried out the information they have received. They also had to study relevant literature and articles during the year. Besides the theoretical discussions with the whole group, the project leader supervised every teacher individually in her practical work with the children.

The goal of the first year of the project has been to develop the teacher´s competence in applying the experientially oriented approach to their work with the children. Another attempt has been to write a "curriculum of ideas" to work on during the next year when the real work with the children will start.

*The second year* of the project will begin with interviews with all the 5 and 6-year-olds in the six different groups. It will be a Piagetian clinical interview, where the focus is on grasping the child´s way of thinking (Piaget, 1975). The content of the interview will relate to the content planned to be worked on during the next coming year (or years).

Narrative observations will be made in the six groups throughout the year, focusing on the specific content worked at. Children will be interviewed again at the end of the school year, with similar questions to those at the beginning.

*The third year* will continue like the second one with observations in preschool on the children that are 5 when we begin and in school on the children that are 6 when we begin. (In Sweden most children begin school at 7, but the age at which they begin will soon be lowered to 6 years of age. Pramling 1991b).

The evaluation in school will also be made by teacher ratings and traditional tests at the end of the year to examine children´s knowledge and skills in the ordinary subjects. The reason for making this evaluation is to test the assumption that children´s conceptions, ideas or how they experience things are more fundamental than skills and knowledge. If this assumption is right, these children ought to be better learners in general in school.

All children will be interviewed a third time at the end of the project period, in order to record children´s understanding of the different phenomena worked with.

The base group of six teachers co-operate in their groups with other preschool teachers or nursery-nurses. Getting these people involved in the project is a concern of each and everyone of the six teachers. This is done on purpose, as we believe that their own thoughts or understanding about different aspects of the project become obvious to themselves when they have to explain it to others.

## The content to work on among the children

The "curriculum" focuses on phenomena in the surrounding world, and is partly oriented towards the subject matter in school. But I want to strongly emphazise that it is not identical with the school curriculum, since in school it is a question of children learning, for instance, the skills of reading, writing and counting. *My approach focuses on providing children with conditions - to develop the basis for learning.*

Within the field of *reading and writing* this alternative involves making the children aware of these skills - to make them visible to children as part of their own experience. What are the features of these skills? How could the relation between verbal and written language become visible? How could it be visible to children that the flow of speach is divided into words? What is the function of being able to read and write? What is a symbol?

Support for this kind of content is found in Dahlgren and Olsson´s (1985) study of how children conceptualize reading. There it is shown that children who did not have an idea about why one ought to read and how to go about it, developed learning problems in school. On the other hand, all children who had the idea that reading would enable them to read books, messages etc, rapidly learned to read in primary school. Francis (1982). using another another research approach, has made similar findings, i.e. that children's ideas about the school activities have a strong bearing on what they actually learn there.

*Another content* is the *experience of numbers,* which is not the same as performing counting procedures - learning the operations. The alternative view in this approach is that arithmetic skills are developed by getting children to grasp the meaning of numbers, and their meaning in different aspects of counting.

Neuman (1987) has shown in her research into the subject of arithmetic that when a child in school ran into difficulties when tyring to solve arithmetic problems, the reason was not ta lack of counting procedures, but that the child had not developed a basic understanding of numbers or the counting activity. Neuman claims that children who have not conceptualized numbers as a pattern, but have to count every number to solve a problem, will run into difficulties when they have to work with higher numbers (over 10) later on.To be able to do this, children must be able to imagine numbers.According to Neuman, learning to imagine numbers can be done by getting children to conceptualize patterns, for example,"finger-pictures". A similar view of basic arithmetic can be found in the Japanese preschool, where arithmetic is not seen as a question of letting children manipulate and exercise with symbols, but as imagining arithmetic problems in dialogue with the children (Gordon, 1987).

Doverborg (1987) studied two preschools with regard to children´s development of arithmetical skills. One of them worked in school-oriented fashion and trained different arithmetic aspects during lessons. The other one utilized everyday life by making these aspects visible when laying the table, when they did needlework, baked, cooked etc. The evaluation showed that children who had been involved in the latter approach to arithmetic were better at solving arithmetic tasks than children who had worked in a way similar to that in school.

*A third content* is to *understand aspects of the natural world,* which could involve making children aware of the ecological cycle (Pramling, 1989), growth, living and dead things (Stepans, 1985), the change of seasons, changes in nature (Maurice, Staeheli & Montangero, 1990) time (Dionnet & Montangero, 1990), aspects of technical science (Driver, 1982; Lybeck, 1981), etc.Within every area it is not the facts children should be given information about, but the focus is on developing their thoughts.

*A fourth content* is to understand aspects of *the man-made world,* like the surroundings in a perspective of *time* (history) and *space* (cultural and geographical aspects). This could mean focusing on phenomena in society such as the shop (Pramling, 1991 a), professions (Furth, 1980), social interactions (Damond, 1977), such as co-operation (Klerfelt, 1991), artwork (Gutavsson, 1991) etc.

*The fifth and last area of content* is children's *understanding of their own learning*, that is, to make them aware of both*what* they learn and *how* this learning comes about (Pramling, 1983). Earlier studies have shown that the child's metacognive level is of great importance to learning (Pramling, 1987; Pramling, 1988; Brown & Reeve, 1985).

## The experientially oriented approach in practice

There is no simple method to adopt, but *teacher's* awareness should be directed towards: 1) *getting children to talk and reflect in concrete situations*, which means to be able to put other kinds of questions than teachers normally do, 2) *becoming informed about existing research on and descriptions of children's thinking* (see the section above), and 3) developing their own *methodological knowledge* in areas such as methods of interviewing (Doverborg & Pramling, 1985), principles for planning themes etc.

The first step when planning a content is to decide what *the goal* of the theme is in terms of what possible understanding to work towards with children. What is the "figure to make visible" and what ought to be the background, using the notions of gestalt psychology. What kind of relationship can a child in the age-group in question grasp? One goal , for instance, could be to understand the relation between bees and nature within a theme of bees. The second step should be to find out whether the children have already achieved an understanding of this particular relationship previously. To learn about children's thinking could be done by means of interviews, drawings, drama, problem-solving, playing and so on. When, in an earlier study, interviews were carried out about the relationship between bees and nature, it was shown that all the children knew that there was a relationship, but they all took the point of view of the bee (Doverborg & Pramling, 1988). This means that they knew that the bees needed nature, while none had the idea that nature needed the bees, for example, for pollination. When the teacher has completed this interview, she will know what there is left to work on from her first goal. The third step in the planning process is to create concrete situations around which children will be able to think and reflect. Finally, it is necessary to document all activities constantly so that the children's learning, i.e.the thoughts developed by the children after being involved in a specific theme, may be evaluated at a later date.

The three aspects described above are skills which the teacher must have, in combination with an awareness of how and what she wants the children to develop. Apart from the teacher's knowledge as described above, and taking the *children's* point of view, the methodology of this approach is based on: 1) *children learn from one another*, which means that the differences between children are held in focus instead of their similarities, 2) the teacher must *expose the ways in which the children are thinking and use these as a content in education*, and 3) children should be involved in activities which directly influence them (material, situations, play, etc.).

To thematize different contents means not only introducing a specific content, as described earlier,but also being able to utilize everyday situations to give children the opportunity to be aware of different phenomena in the world around them.

## Reflections on the first year's project

The first year of this ongoing project has been focused on developing the teacher's competence. From the start of the project there were seven teachers. The one who dropped out of the project after a few months, understood that she would not be able to work with this approach within the firmly structured programme they had at her day-care centre. Since she felt that it would be such hard work to influence her colleagues to change, she left the group.

During my supervision of the groups I have seen that the teachers feel very happy to participate, and they all do what's expected of them regarding the tasks and reading the set texts. They all feel that they have manured during the year, and I have also noticed their struggle, much due to the fact that this approach partly diverges from the traditional "preschool-teacher's soul", and what she has taken for granted earlier. It seems like there is a resistance towards breaking into the child's world, that is, towards touching what is normally conceptualized as "the childs own creativity". To problematize gives the teacher a fear of not being able to give a correct answer herself if the child returns the question. Another reason could be that she has an idea that a question put to a child should always be easy to answer - a child should never experience failure. In a way, the answer seems more important than the question from the preschool teacher's point of view, whereas in *this research approach the flow of ideas is more important than the answers*.

Other studies have indicated that there are a very small number of challenging activities in the preschool setting both in Britain (Sylva, Roy & Painter, 1980) and in Sweden (Kärrby, 1987). It is therefore hardly surprising that, during the first year of this project, there was an obvious confrontation between the experientially oreinted approach and the preschool teachers' earlier views of knowledge and learning. At the same time, they felt strongly that they could retain most of the preschool methods and practice they used previously.

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# PRESCHOOL EDUCATION - A MODIFIED MONTESSORI APPROACH

Vedavalli Srinivasan, International Grammar School, Sydney

> *The implementation of any educational system ought to begin with the creation of an environment that protects the child from the difficult and dangerous obstacles that threaten him in the adult world.*
>
> */MARIA MONTESSORI*

## BACKGROUND FOR THE APPROACH

International Grammar School, Sydney is a unique institution. It follows a bilingual approach from Pre - school through to High school. Pre-school years being the foundation years, the bilingual approach is introduced at this early stage with two languages for every child (English and a second language).All the second languages that are offered in the main school curriculum are offered at the Pre-school level .Individual attributes of " Montessori " and " Early childhood " methods are combined to develop a more effective Pre-school system that forms a basis for subsequent learning and social adjustment within the main school curriculum.

## NEED

Existing teaching techniques have been restricted to approaches pertaining to a single method or philosophy.However, the need to design and implement a cosmopolitan program to enhance the multicultural and bilingual aspect of our school and cater for the varying needs of a modern society, have prompted me to integrate Montessori and Early childhood principles. The Pre-school classroom is brilliantly presented with all the Montessori didactic materials to persue the "Montessori" path of education for the Pre-primary children. We had to blend in the second language, music , drama, and craft activities harmoniously.This congenial compound is achieved by varying the Montessori approach to accommodate the Early childhood ideas and principles in all the sections of the classroom (detailed later under the "Method" itself).

## AIMS

1. To preserve the basic Montessori method of education as the foundation in the Pre-school years.
2. To modify it and bring in Early childhood principles to promote educational efficacy.
3. To attain the primary school requirements of bilingualism, drama, music and craft.
4. To maintain the hybrid method as totally child centred.
5. To encourage greater parental involvement.

## IMPLEMENTATION

### Modifications with Montessori method as basis.

The classroom is fully equiped with Montessori materials. These involve sequentially sensory motor and intellectual exercises for reactive muscular and mental development. The structured curriculum of Montessori education is designed to allow the principles and objectives of early childhood education to develop the social, cultural and creative facets of the child.This child development is prominantly advocated by the Early Childhood philosophy and is intergrated into the Montessori method of sensory, motor, and intellectual development, within a structured curriculum. The Montessori program usually expects children to attend all five days (half days which are later extended to five full days per week). However, at International Grammar School (IGS henceforth), pre school enrollment incorporates a combination of sessional, and full time students. The enrollment is split into two, three, or five day weeks for each individual student. This has necessitated modified group programs to be tailormade for each student depending on his/her attendence. The classroom is a conglomerate of thirty children of varying age groups (ages ranging from three to five years). The children are free to move around and choose any activity using Montessori equipment and pre-primary activities. It is impertive that the preparation of the environment and manipulation of the materials is done correctly to preserve the delicate balance which makes the system operate.

The classroom procedure follows a definite structure with sequential time blocks for the various activities.The children are guided initially (the degree of guidance depends on their readiness).

1. The morning session begins with activities involving Montessori materials. The following areas of education are covered:

(a) Practical Life Exercises.
(b) Sensorial.
(c) Language.
(d) Arithmetic.
(e) Geography.

**(a) Practical Life Exercises** - Involving real life activities to teach the child self-care skills and care of the environment. Apart from the typical Montessori activities like pouring,polishing, dressing frames etc., various educative puzzles,manipulative blocks,constructional kits, and art and craft activities are also kept this section. This is the modification in the method that has been successfully added on to involve more children in various activities to discover themselves.In doing these daily house-keeping tasks like mopping,sweeping, polishing,cloth-washing etc.,the child has ample scope to communicate in the second language with the language assistants.These activities help to promote the development of the child's fine motor skills,independence,and self-esteem.

**(b) Sensorial exersises** - All Montessori materials to involve the child in sensory training for perceptual efficiency, tactile manipulation, etc., are well supported by many supplimentary exercises such as attribute blocks, sorting games etc., to make it more interesting . In the Montessori education, every topic follows isolation of quality and categorisation - for example, in the geometric cabinet, the child learns to identify one quality at a time - the shape and colour are constant but the size varies. But in the attribute blocks more than one quality varies. At IGS, being a modified Montessori, the "isolation" quality of the Montessori equipment makes the child master the environment-but at the same time the absorbent mind of the child working with various other materials during the sensitive periods allows him to explore and manipulate the environment.
The Montessori sensorial apparatus are designed to suit individual and group activities- the design is materialised abstraction of generalised quality. The child perceives the quality. Certain constructive materials are given along with the Montesssori materials within the prepared environment- these materials are changed around from time to time to provide variety for the child. The materials allow for the child's creative variations stemming from their understanding of the environment. The child is able to explore the various qualities he/she has aquired while being aided by a creative mind to look for furthur variations without being destructive. This philosophy of creativity permeates throughout the classroom.
The notion of self discipline is integral to the Montessori philosophy- thus the child is able to develop freely, but within carefully placed guidelines. The guidelines (or limitations) are not directed at what they do, but how they do it. The sensorial sections of the classroom helps the staff to evaluate the child's control of movement, ability to follow a sequence etc. The modified system focuses on the objective of the material and expands the child's vocabulary. For instance, the presentation of the sensorial equipment focuses on that material's objective, but due to greater interaction in the classroom, the materials are usable with increased flexibility and there is more vocal interaction. Such vocal interaction is also carried out in the second languge if a language teacher is invoved. This produces a progression from restricted to refined knowledge.
The bilingual approach of the school is brilliantly achieved with the use of the sensorial section - the Montessori equipment is so conceptual that with the language used at this stage it helps the child to retreive the concept and helps him to apply the language in his other daily routine-e.g. in our classroom we have always had prompt responses from children with appropriate words and phrases in their chosen second language as and when the lesson was done in English. So the language becomes second nature to the child. This gives the recognition by others of the child's knowledge and helps him in the overall development.

**(c) Language** - Langage activities are followed with Montessori materials as basis for learning to write and read e.g. tracing the sand paper alphabets with sounds (Fondation style as required by the Primary school), Metal Insets for pre-writing exercises etc..Many language cards are made available to the child covering various topics-(all topics are isolated and categorised by subject matter) . Picture cards with a blend of topics are prepared as an extention of vocabulary. The bilingual approach is achieved when the second languge assistant uses the language cards while working with a small group of children in their chosen second language. All the various Montessori and non- Montessori materials are developed to satify the needs of the child bilingually in individual and group situations.These cards aid the children to develop their vocabulary, e.g. butterfly- la farfalina(Italian), cat - le chat (French) etc. Similarly, the Montessori cards on parts of the flower, tree,and leaf, and parts of the body, are simultaneousely taught in English and in the second language every day. In all these activities the child has total freedom in the choice of language. The teacher merely guides the child without any pressure in the use of materials and language. The child is very absorbant during the sensitive period and the language development, mostly pertaining to spoken language is phenominal. Every child in our pre school starts the day pleasantly wishing the teachers in the various languages- Bon jour, Bon journo, Ohio,Good morning etc.It is a pleasure to obtain such results in a pre-school curriculum while adhering to the International school's philosophy.

**(d) Arithmetic** - With the Montessori method the child is taught to understand the concept of numbers by handling " arithmetical aids" like the Number rods, Spindle box, Golden bead material etc. I have also introduced various related games and activities to promote greater responsiveness and stimulate interest in number work. Thus the basic concept is established in the child's mind by the materials and the games extend their knowledge in group work.Bilingualism also filters into this part of the system by introducing the children to the numbers in the second language. Continuous repetition acts as a reinforcement and strengthens the childrens' vocabulary. I personally experienced this one day when the children voluntarily began counting in Italian on our way to the nearby park. Although the montessori materials are extensive, regular teaching methods like dice games, numerical dominos, coloring number sheets etc are used to enhace the the child's conceptual knowledge.

**(e) Geography** - This subject is well covered by the Montessori map puzzles of the world and the continents. The children in the International schools already have a basic Knowledge of the countries of the world. This multicultural aspect of the school is fully realised in our Geograohy section of the pre-school classroom - where the children have an opportunity to sit in a group with the native speakers of their second language and discuss the different countries, their people, culture, food etc.. It is well suppoted by the picture cards in the folders of the continents. This globalism is furthur enhanced and made more interesting by colouring the maps, flags etc.When the syllabus is formulated for the term, one country from each continent is covered as the topic of the term and the children have the opportunity to expand their knowledge of that country.

**Music** - The entire group then proceeds to a twenty minute music session. This is conducted by specially trained teachers, who teach music in our school from pre-school to high school classes. So there is good interaction between the child and the teacher from very early stages. This also enables the teacher to plan and program music lessons according to the needs of the children and the group. Our pre-schoolers have a very healthy, supportive and informative interaction with the music teacher, who follows the Orff-Schulwerk philosophy. There is a basic curriculum which includes speaking, singing, rhyme and rhythm, movement, listening, pitch and beat, music language etc.Since the most absorbent age group of children is between three to six years , the musical awareness and learning is at its peak in the pre-school years. Carl Orff's idea of music pedogogy involves the whole child. He wanted the music teachers to maintain the essence of his educational ideas with an emphasis on "hands on" experience. This is strictly followed in our pre-school music sessions every day for twenty minutes. With these foundations well established, the children are ready to enter the more formal aspects of music at the primary school level. These music sessions at IGS are designed to be playful, enjoyable and simultaneousely educative and purposeful. Music lessons develop the childrens' muscular co-ordination (needed to pick up the musical instruments and play them), perception (reading rhythm cards - Ta Ta, Ta Te Ta etc.), voice modulation (pitch training), and flexibility (movement to music). During these music lessons , the class teacher or one of the assistants is also present in the group with the music teacher, to help the children feel at ease.

**Second Language** - It is presumed that by the time children reach a school-going age they probably have a speaking vocabulary of several thousand words. Since IGS is commited to its bilingual approach and children come from different cultural backgrounds, it is a very challeenging and stimulating experience for the teacher to provide the child with an environment which will suit his/her needs. The language development is unique to each child. In our multi - cultural environment, the children are exposed to many languages from other children and teachers. The second language lessons are so popular, that we often come across children voluntarily expressing themselves in their second language:e.g. one of the Australian children (4 year- old) went home and asked her mother, " mummy, what do you say for 'Dimanche' in English? ".When I do the ' days of the week' in English (in group time) the children promptly respond with equivqlent words in their second languages (e.g. Lundi,Mardi etc.). In fact, their eagerness in learning languages extends to others like Tamil, Spanish etc. (in their group lessons) when the topic of people of the world and their languages are covered. The second language sessions are held every day for half an hour with small groups of children to learn the language chosen by the children. Apart from these lessons, the children are 'spoken to' by the assistants in the pre-school classroom (who are native speakers of that language and who take the second language lessons) throughout the day. Speaking, is not only a basic means of language development but it also consolidates their language learning. This is achieved at the earliest stage at IGS pre-school in all areas of learning. The second language is used in short trips outside, in picture reading, story telling, craft activity, cooking etc. The bilingual aspect is thus evident in all areas of learning and at all times in our pre-school

**Circle Time** - This is a group activity with programmed topics(weekly program). This is a twenty minute session following the Montessori activities in the morning and another twenty minute session following sleep/play time in the afternoon. This is programmed by the teacher covering topics as per the needs of the children -

a. Montessori didactic materials need to be presented to check and evaluate the childrens' understanding of the same are proper.

b. Topics in Science- simple experiments in Air, Water etc., germination of seeds, Life-cycle of butterfly etc., books on various topics like Reptiles, Insects, Mammals etc..

c. Geography - The' Montessori ' geography map puzzles of the world and the continents, land and water forms, etc all of which are covered in thorough detail.

d. Grace and coutesy lessons , classroom routine and manners are periodically re-inforced.

e. Language and Arithmatic topics- these are programmed according to the level of the children in the group( e.g. group of older children doing the ' Teens board', and the group of younger children doing the numerals and concepts 1-5 in Arithmatic ).

f. The afternoon session of twenty minutes involves the active participation of the children with story-telling, drama, action songs and finger play,show and tell, balancing and walking on the line,silence game( a 'Montessori ' activity ) etc.

Thus, teacher and child centered curriculum has been simultaneousely achieved.

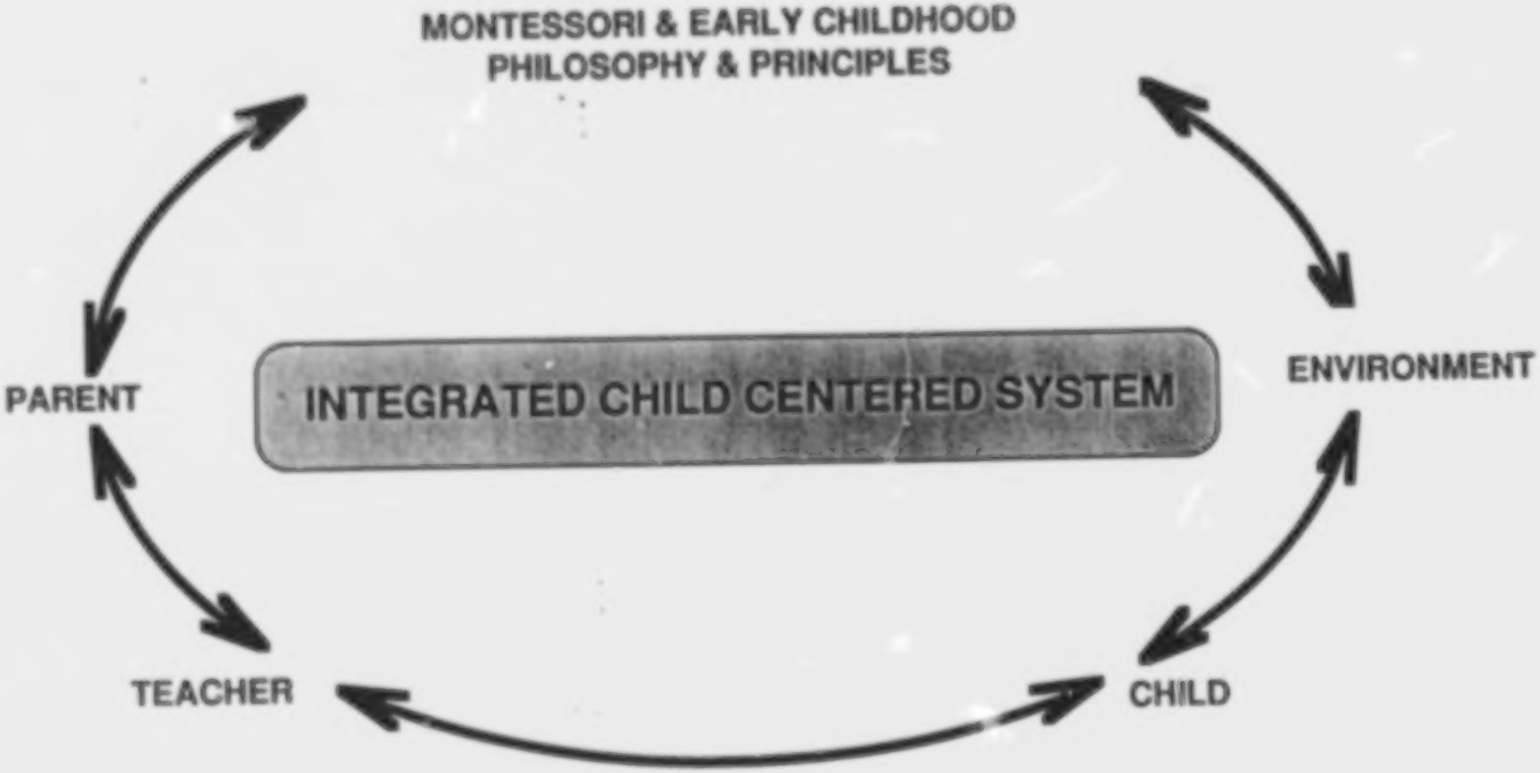
**Out- door Play** - Montessori approach has a vast scope for the development of fine-motor skills in a child. The Early childhood principle of 'play' as an essential ingredient in pre-school is introduced in IGS for the children to fulfill their gross-motor development with equipment appropriate to a particular age. Activities include throwing, balancing, pushing, climbing etc. The equipment encourages the children to share and co-operate. They also learn to increase their social skills, language, and vocabulary. During this time, creativity, playacting (involving families, hospitals etc) and interaction with their peers and adults are the focus of their activities. At IGS we also aim to fulfill the physical requirements of the children by providing a playground. They enjoy their outdoor play with sand and water and thrive on outdoor equipment such as balancing boards, climbing frames, blocks etc, which are designed to improve their physical co-ordination. The outdoor activities are specifically structured to compliment all the knowledge established in the classroom. During play time, the second languages that are learnt in the classroom become ' expressive and interactive', and at this stage the playground almost instantly is transformed to a "miniature world" of its own.

**Sleep Time** - The post-lunch session incorporates an hour of sleep time. This is not compulsory for children who choose to pursue other activities such as outdoor play, reading, or 'quite time'. Sleep time is foreign to the Montessori way of education, but is necessary to help the children cope with the long, and demanding day. In pure Montessori schools, the children only stay for three hours (three year olds). An additional two hours are added when the children are over the age of four (four and a half year olds). This smooth transition means that there is no need for sleep time as the children are enegetic throughout their school day. Modern society places a lot of pressure on thc education system as parents require the school to cater for the children for the entire working day- this is only possible if the children are given an opportunity to rest. By making the sleep time non-compulsory, we have preserved the Montessori philosophy of not forcing the child into something he/she is not at ease with. The children take a comforter or book and go to sleep on their own and are continually supervised by the teacher during this period.

**Craft Activities** - There are various art and craft activities available for the children during the morning session. They are free to choose from coloring, pasting, cutting, serving etc. In addition to this, there is another twenty minutes to half-an-hour in the afternoon (after sleep time) devoted to planned craft activities. Often these planned activities are an extension of the material covered in the morning- eg: If the morning session was Australian geography, the afternoon craft session may involve activities such as coloring in the Australian map or pictures of places of interest in Sydney etc. Programs such as 'Origami', play dough and clay modelling are specifically aimed at promoting motor skills. The children are also allowed to choose their own craft activity(s) in addition to the planned activity(s) to nuture creativity. Once a week this session is used for playacting, story-telling and puppet shows to enhance the childrens' skills in language and public speaking. By scheduling this session at the end of their day, I have found that the children finish on a very cheerful and satisfied note.

## PARENTAL INVOLVEMENT

In traditional Montessori schools, parental involvement had always been restricted to activities such as fund raising and management. At IGS the parents' involvement extends to a close interaction with staff and children. The parents are encouraged to stay with recently enrolled childern to help them settle into the new environment. Parents who are skilled in a particular activity (such as acting etc) which will furthur the childrens' education are encouraged to perform for the class- eg: One of the parents at IGS who was a student of Early Childhood education, demonstrated dramatic skills on the topic 'Trip to Space'. This particular demonstration helped us gain an insight into the Early Childhood approach to drama. We also had aerobics classes set to South American music once a week conducted by another parent. On another occasion the children were taught the art of pasta making by one of our Italian parents. The parents often volunteer to accompany us on various excursions. This additional involvement by parents not only helps the children, but it also gives the parents an opportunity to appreciate the education system and gives them a better understanding of their child's development.



MONTESSORI & EARLY CHILDHOOD
PHILOSOPHY & PRINCIPLES

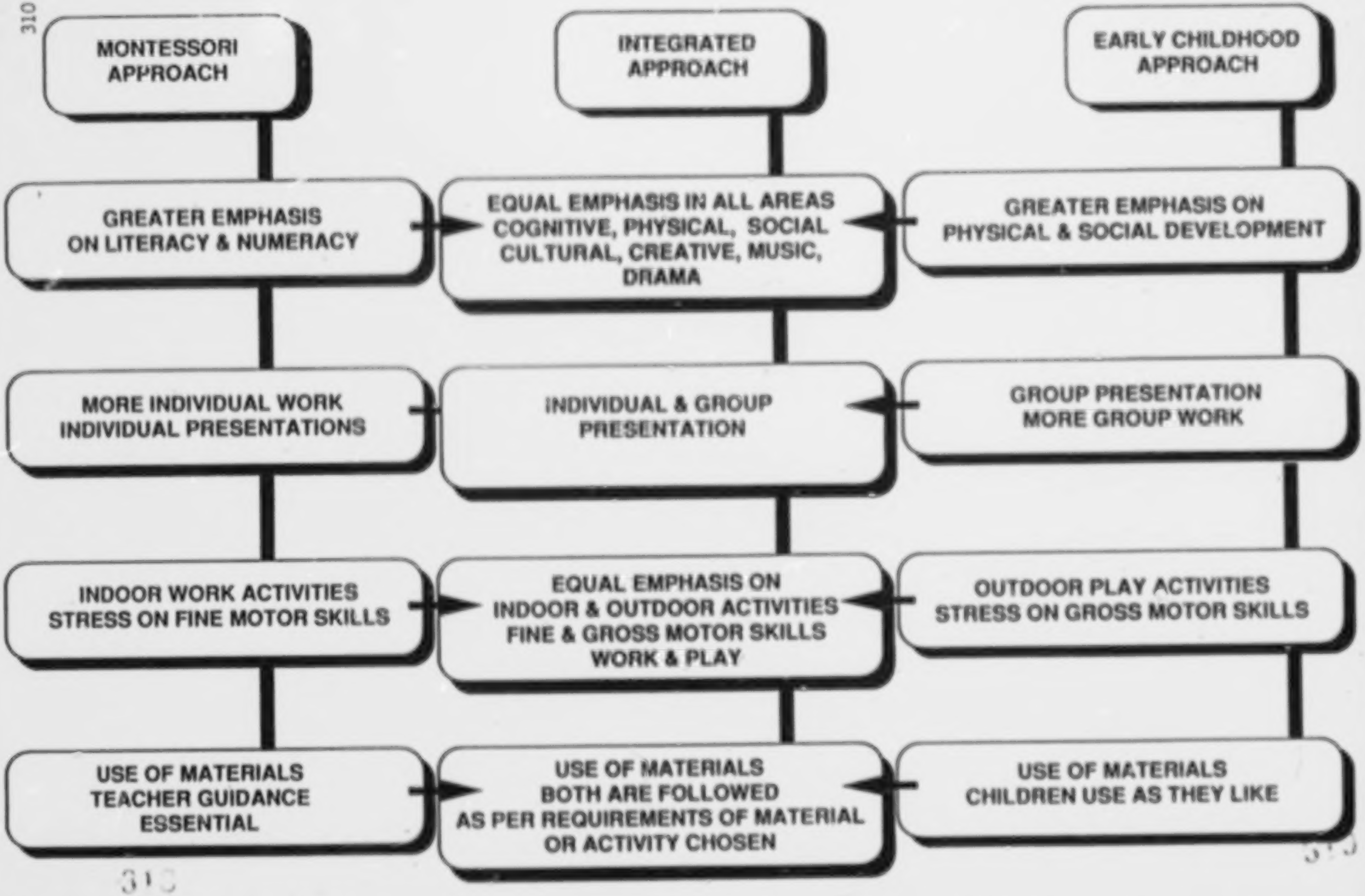
PARENT

**INTEGRATED CHILD CENTERED SYSTEM**

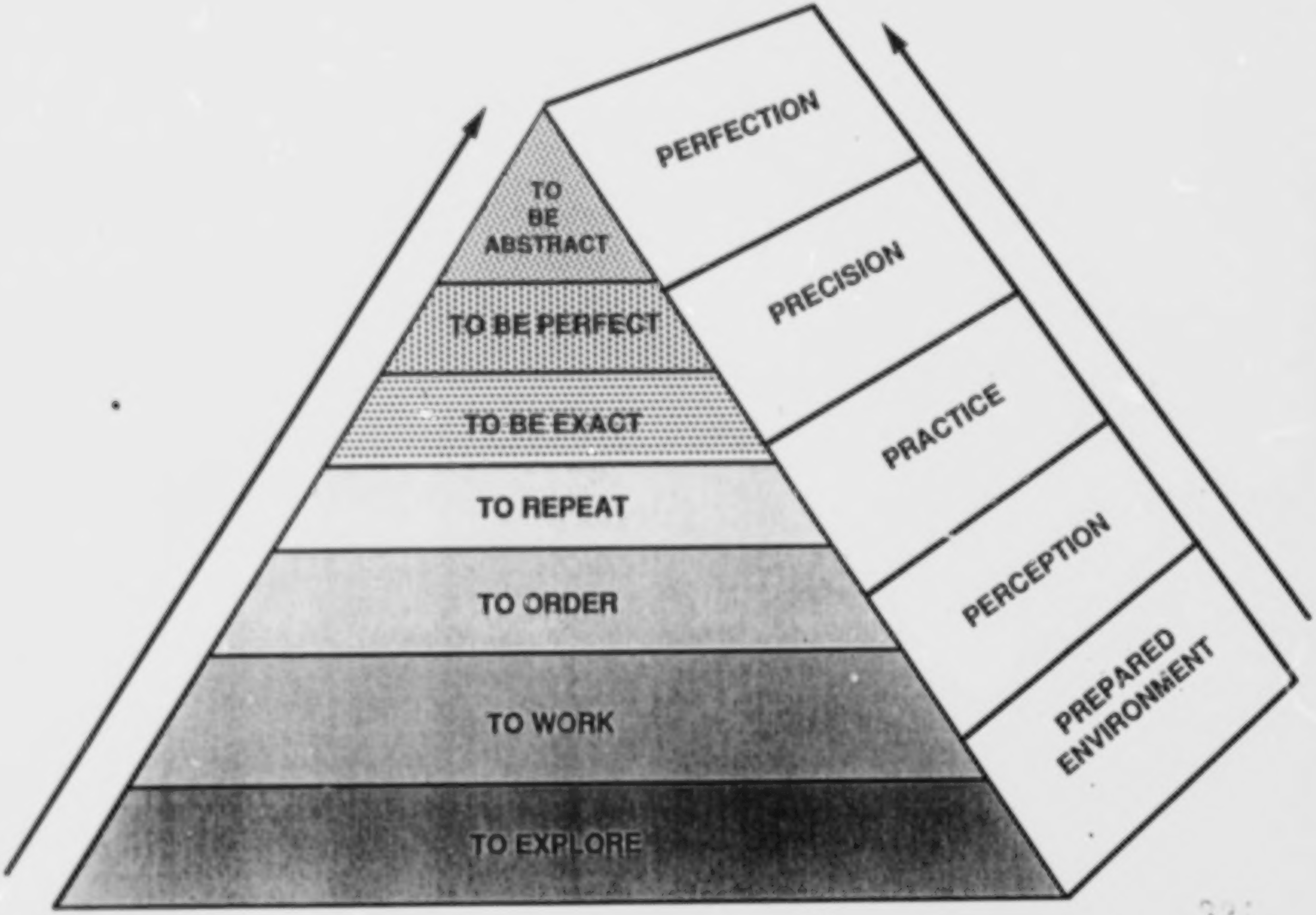
ENVIRONMENT

TEACHER

CHILD



| MONTESSORI APPROACH | INTEGRATED APPROACH | EARLY CHILDHOOD APPROACH |
|---|---|---|
| GREATER EMPHASIS ON LITERACY & NUMERACY | EQUAL EMPHASIS IN ALL AREAS COGNITIVE, PHYSICAL, SOCIAL CULTURAL, CREATIVE, MUSIC, DRAMA | GREATER EMPHASIS ON PHYSICAL & SOCIAL DEVELOPMENT |
| MORE INDIVIDUAL WORK INDIVIDUAL PRESENTATIONS | INDIVIDUAL & GROUP PRESENTATION | GROUP PRESENTATION MORE GROUP WORK |
| INDOOR WORK ACTIVITIES STRESS ON FINE MOTOR SKILLS | EQUAL EMPHASIS ON INDOOR & OUTDOOR ACTIVITIES FINE & GROSS MOTOR SKILLS WORK & PLAY | OUTDOOR PLAY ACTIVITIES STRESS ON GROSS MOTOR SKILLS |
| USE OF MATERIALS TEACHER GUIDANCE ESSENTIAL | USE OF MATERIALS BOTH ARE FOLLOWED AS PER REQUIREMENTS OF MATERIAL OR ACTIVITY CHOSEN | USE OF MATERIALS CHILDREN USE AS THEY LIKE |



TO
BE
ABSTRACT

TO BE PERFECT

TO BE EXACT

TO REPEAT

TO ORDER

TO WORK

TO EXPLORE

PERFECTION

PRECISION

PRACTICE

PERCEPTION

PREPARED
ENVIRONMENT

## FEEDBACK

The Primary teachers , Parents, and the school management have given a positive response on the success of the system.

## CONCLUSION

The system I have presented to you has been operational for the past three years at IGS. I have continuously monitored the feedback and made all necessary changes for fine tuning. IGS has been very pleased with the results as the system not only identifies the aims of a modem education system but also achieves them successfully.

**Feeney et al explains**

> *"Curriculum, need: to enable learners to make associations and perceive inter -relationships among disciplines of knowledge. Learning needs to be integrated and organised around themes of interest to learners. Most important , each person must be valued as cn individual and his orher uniqueness recognised and respected "* .

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# The Use of Games and Books to Improve Children's Number Concepts: The EMI-5s Study

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Previous research has shown that there is substantial variability in levels of mathematical understanding as early as the preschool years. For example, Hughes (1981) found that middle-class three-year-olds were as good at doing addition and subtraction as working-class four-year-olds. Other researchers have found similar kinds of differences among four-year-olds in their ability to do tasks involving counting and enumeration (Ginsburg & Russell, 1981; Kirk, Hunt, & Volkmar, 1975). In New Zealand, children enter school on their fifth birthday with varying levels of undertanding about numbers. For example, some children can rote count to 100 and do addition and subtraction with concrete objects as well as mentally. Other children are unable to rote count or even make a group of two objects when requested. A year later when the children were six, the children with least number knowledge on entry to school still knew less about numbers than the had the children with the greatest number knowledge on entry to school, the previous year.

Longitudinal studies have shown that levels of achievement in mathematics are relatively stable over the primary and secondary school years (Fogelman, 1983; Newman, 1984; Wels & van den Munckhof, 1979). The children who are ahead initially tend to stay ahead throughout the school years, while those who are behind remain behind. In one study, levels of mathematics achievement at fifteen were predicted just as accurately from performance at seven as at ten (Newman, 1984). Moreover, the variability in mathematics achievement evident when children enter school, increases as students advance through the school. That is, the children who are at the bottom get increasingly further behind the children who are at the top (e.g., Fogelman, 1983; Fogelman & Goldstein, 1976; Ross & Simpson, 1971). Unfortunately, these longitudinal studies have tended not to begin measuring children's mathematical achievement until the age of about seven, and have relied on paper-and-pencil tests of formal arithmetic. Hence these studies provide no information about the predictive validity of measures of the informal mathematical knowledge which many children possess when they arrive at school.

Research has shown that programmes designed to change the long-term outcomes for children from disadvantaged backgrounds have been fairly successful (see Royce, Lazar & Darlington, 1983). The features of intervention programmes which have been most strongly related to later success include the age of intervention - the earlier the intervention, the better the chances of succeeding at school, and the degree of parental involvement - the more involvement, the better the chances of succeeding at school. Furthermore, children who participated in Head Start preschool programmes maintained their achievement advantage over children in the control groups well into primary school, and this effect was particularly marked for mathematics (Royce et al, 1983). This evidence suggests that mathematics is a subject in which children are especially likely to benefit from extra assistance, and that the first year of school is not too soon to begin trying to improve children's mathematical skills.

Although many New Zealand children enter school with good counting skills, there are a considerable group who lack these abilities. For example, in one recent study of Christchurch five-year-olds, 26% could not produce a rote-count sequence up to 10, 15% could not enumerate a set of five identical objects, 23% could not apply the cardinality rule to a set of five objects they had just counted, and 38% could not form a set of five objects on request (see Young-Loveridge, 1987a, 1989a). Over the four-year period in which these children's number concepts were studied, counting skills emerged as particularly important (Young-Loveridge, 1990). The best and most consistent predictor of later success in mathematics was the ability to form sets of given sizes at the age of five. When sequence knowledge, understanding of cardinality and enumeration skills were combined with forming sets, the relationships were even stronger. These results clearly indicate a need to assist children to develop more effective counting skills at the beginning school level.

The purpose of the present study was to explore the effectiveness of two kinds of intervention procedures aimed at improving the number skills of five-year-old children. Intervention A (School-based) involved the withdrawal from the classroom of children in pairs for number stories and games designed to improve their numbers concepts and skills, particularly counting skills. Intervention B (Home-based) involved a combination of home visits and parent workshops aimed at raising parents' awareness of the importance of counting skills for this age group and providing them with resources and ideas which could be of use to them in assisting their children to learn more about numbers. These two kinds of intervention have many advantages in that working with pairs of children is more economical than working with one child at a time (cf. Reading Recovery), involving parents in the teaching of their children has the potential to change the kinds of interactions parents have with their children in many different contexts and over a longer period of time than if the child has an intensive but relatively short period of extra help by a specialised teacher.

## METHOD

The sample consisted initially of 246 children (115 girls and 131 boys) aged 5.0 years to 6.5 years (The child aged 6.5 years had only been at school six months at the time of the study. Apart from that child the oldest children were aged 5.7 years). The children in the sample came from six schools in middle to low income areas of Hamilton. The sample was composed of approximately equal numbers of European (47.6%) and Maori children (44.3%). A small number of children were of Pacific Island descent (4.1%) and a further 4.1% from other ethnic backgrounds. The majority of children (74.0%) had attended kindergarten before entering school. Other forms of preschool attended by a further 9.8% of the children included Playcentre, Kohanga Reo and Childcare. The school records indicated that forty of the children (16.3%) had not attended any form of preschool. At the time of the second interview 241 (98%) of the original sample were interviewed again.

Individual interviews were used to assess children's number knowledge before and after intervention. The second interview included all of the numerical items from the first interview plus some new more difficult items.The interviewer endeavoured to make the interview as enjoyable and relaxed as possible by presenting the tasks like a game.The researcher asked for the child's assistance in helping a stuffed dog (a small Footrot Flats "Dog") and rabbit to learn about numbers. Once all of the children had been interviewed, selections were made of children for intervention. Within each of the pairs of schools for each of the two types of intervention children with low to average levels of number knowledge were assigned to either an intervention or a contrast group. For the school-based intervention (i.e., Intervention A), children were paired with another child from their class whose level of number knowledge was similar.

### Intervention A (School-based)

The 26 children attended the intervention session for 30 minutes each day over a seven week period. The session began with a number story or rhyme. This was followed by a game which was familiar to the children. A new game was then introduced, and the session finished with a number rhyme or story. The purpose of the intervention was to develop children's knowledge of the number-word sequence, their accuracy, reliability and automaticity in using the enumeration process, their experience with forming sets of a certain size or moving a certain number of spaces along a path, and their knowledge of stylised number patterns (e.g. dice patterns) and numerals. The games included many different kinds of board games using dice with dots and with numerals, card games, as well as commercial games such as dominoes (including double-sixes and double-nines), playing cards and Snakes and Ladders using poly-dice with numerals up to 20. The books included stories in which number is part of the plot (e.g. Hungry Caterpillar), as well as some counting books and books of number rhymes. A deliberate effort was made to de-emphasize competition in the games. The objective of the game was that each child would finish the game but it didn't matter who was first. In fact, the children played very co-operatively with each other and sometimes had to be restrained from helping their partner too quickly before that child had had a chance to think about it themselves.

### Intervention B (Home-based)

Parents of the 26 selected children were initially contacted to ascertain their willingness to participate in the intervention programme. Parents were visited at home each week for two weeks then attended weekly workshops for five weeks, followed by a final home visit. During the first home visit, the researcher explained the programme to the parents, and left a book and game for the child to play. During the second home visit, the researcher interviewed the parent/s about the kinds of mathematical activities that occurred at home, the parents views about mathematics and their own school experiences with mathematics. The book and game were swapped during this visit also. The parent workshops were offered at several different times including one in the evening and three during the last hour of the school day. Each workshop had no more than about six parents attending at a time, and tea, coffee and biscuits were provided to help make particpants feel welcome. Childcare was provided for those parents who brought preschoolers with them. The first workshop focussed on number in the everyday world and was aimed at raising parents' awareness of the many places in which numbers appear and the difference between the use of numbers to identify things (e.g. phone numbers) and the use of numbers to refer to quantify (e.g., numbers in recipes). The second workshop focussed on the use of numbers to do things home and the difference between counting discrete objects (i.e.,"things") and measuring continuous quantity (i.e. "stuff"). The third workshop gave parents the opportunity to play some of the games themselves and to gain some undertanding of the kinds of mathematical processes which children use when playing the games. In workshops four and five materials were provided so that parents could make their own copies of some of the games that were on loan. During the final home visit, parents were asked to elaborate on their earlier evaluations of each of the games and books their children had used and to reflect on the value of the workshops for them and their children. The books and games were identical to those used in Intervention A. All of the workshops and the interviews with parents were audio-taped for later transcription and analysis.

## FINDINGS

### What the Children Knew Initially

Comparisons between these results and those of an earlier study (see Young-Loveridge, 1987a, 1989a) showed that despite being from less advantaged families, the Hamilton children knew as much about numbers as their peers in Christchurch did in 1985. This finding has some interesting implications for teachers who use BSM and who need to take account of this existing knowledge when selecting the appropriate cycle from which to draw activities. For example, if teachers are to extend the enumeration skills of the 65% of 5.0 to 5.7 year-olds who can already enumerate a set of nine objects, then they will need to look beyond cycle 6 module 3, where enumeration of a set of nine objects first appears. Likewise, with the operations of addition and subtraction of small sets, over half of the children in this age group will need to be working on activities beyond the first modules of cycles six and eight, respectively, if their knowledge in this area is to be extended at all.

### What the Children Knew after Intervention

Figure 1 shows the pretest and posttest scores for each of the groups. Although the pretest scores are very similar, there is a substantial difference between groups in posttest scores. The children in Intervention A (school-based) made the greatest gains and outperformed their contrasts by more than 14 score points, a statistically significant difference. The gain scores of children in Intervention B were less impressive when compared with those of their contrasts (just under 5 score points, on average), but this difference did reach a statistically significant level. Comparisons with the across-school contrasts (Contrast C) showed a similar pattern.

It is interesting to note that the children in Contrast A did somewhat better than did those in Contrasts B and C. This may have been the result of having one of the researchers in the school each day for seven weeks and a greater awareness by the teachers about the nature of the intervention. Although teachers did not have the opportunity to observe what was happening during intervention until almost the end, even in this short time the emphasis put on number in their classroom activities may have increased sufficiently to affect the other children in the class. The other possible explanation is that the children came back from their intervention sessions and shared some of their experiences with their teachers and classmates.

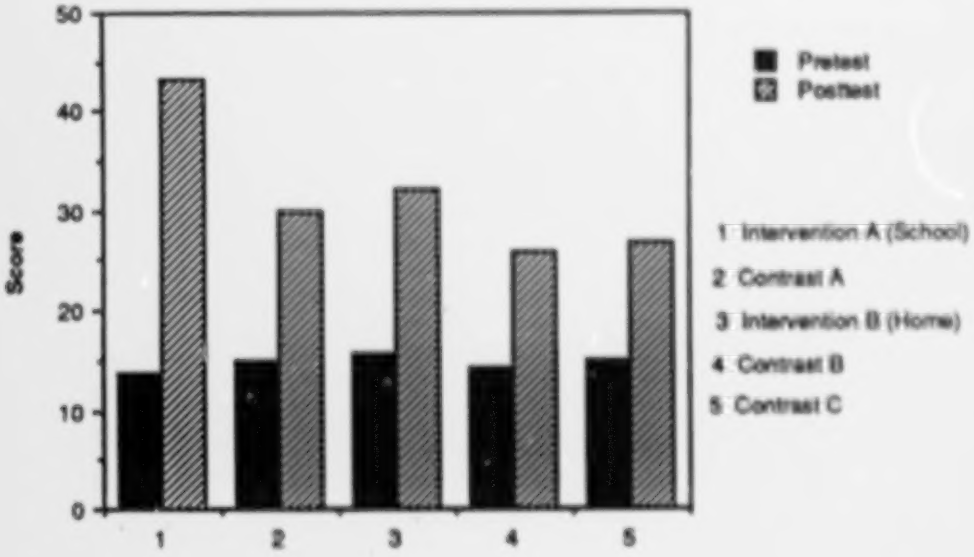

Figure 1: Pretest and Posttest Scores for each of the Groups

There were some features of the school-based intervention session that seemed to be particularly important. One was the pairing of children for the session. This resulted in many instances of co-operative behaviour among members of the pair. One child was always eager to help the other if he or she was experiencing difficulty in solving a problem. The observer often noted that children were making nonverbal gestures to their partners to help them with their problem. One common helping strategy was to hold up the appropriate number of fingers to correspond to the numeral that a child was having difficulty identifying. Having two children made it possible to take turns on the games, but meant that the time between turns was relatively short. Teachers reported that some of the children who had been coming to intervention sessions were now much better at maintaining one-to-one correspondence between their pointing and their oral reading. Other differences included better social skills with peers and the development of a special relationship between the two members of a pair who attended intervention together.

Although the home-based intervention programme had less of an impact on children's number concepts and skills, at least in the short term, it provided some important experiences for parents. Some parents reported that they were now interacting with their children in a different way since coming to the workshops. For example, one mother responded in the following way to a question about whether she had learnt anything herself from coming to the workshops:

> Oh, yes. I think it's got me a lot more involved with A too. We've actually been doing quite a lot together, reading and playing games. It's given me a better understanding of her. Her and I are communicating a lot more now.

Other parents made similar comments.

> Well, it's certainly made me more aware of what I as a parent I have to do to make C more aware. You know, I had to become aware myself before I could hand it down to her, awareness of numbers and different things.
>
> It made us aware that there are numbers out there that we take for granted. You go ahead and do things without being aware that we've seen numbers and we are doing things by numbers. It made us aware that these children are seeing the same things but it's not being pointed out to them.
>
> I thought they (the workshops) were good because I got a lot from it. Even I didn't realise how many times numbers, during the day, you know, I look at them quite often on the clock and on the speedo of the car and things and don't realise that. Yeah.

However, not all of the parents were as enthusiastic about coming to the workshops. A few parents seemed reluctant to come to workshops but were very appreciative of the opportunity to borrow the games and books during the home visits. This finding highlights the need to offer a variety of different options for parents to become involved in their children's learning. No single approach is likely to suit everyone. Although the social aspect of the workshops may have put some parents off, it was an added bonus for others. The third workshop, which involved playing some of the games, was particularly enjoyable for several of the mothers who commented that they hadn't had so much fun for years.

## GENERAL DISCUSSION

What this study shows is that intervention procedures using books and games can be very effective for improving children's number concepts and skills. One of the important aspects of this study was that the children who were selected for intervention had not yet experienced failure in mathematics. Focussing on early number concepts within the first nine months of school means that this is virtually assured because none of the children with low to average number knowledge had yet been given activities from BSM which involved number concepts. Hence the intervention programme was much more a support and boost to children's emerging numeracy than it was a remedial programme for children who were struggling in mathematics. The programme was aimed at helping children to experience greater success in the future, rather than remedying the misconceptions or lack of understanding that had developed in the past. In this way it is quite different from Marie Clay's Reading Recovery programme. It is clear that this intervention is not to going to solve all of the problems which develop in mathematics as children progress through the school system. In all likelihood, other kinds of intervention will be needed at other points along the way. The nature of those interventions will depend very much on the kinds of processes which are of critical importance. For example, perhaps as children move from Junior classes in to Standard two, the crucial processes change from intial counting and cardinality concepts to understanding the decade structure of the number system and the meaning of place value (see Faire, 1989). Whereas, in reading children seem to reach a threshhold of mastery, above which they can read independently, in mathematics the concepts and skills become increasingly difficult over time.

It is interesting to consider why the gains for children in Intervention A (School-based) were so much greater than for those in Intervention B (Home-based). It is probable that the total amount of time spent playing number games and reading number stories with an adult was higher in the school situation than at home, at least for the majority of children. The interviews with parents, as well as the attendance at workshops revealed a wide range of committment to the programme by parents. Some parents attended few of the workshops and hence did not get as many opportunities to exchange their games and books. Other parents, although they attended workshops regularly, reported that they gave the responsibility for reading the books and playing the games with the five-year-old to older children in the family rather than doing it themselves. In order to take account of differing levels of parental committment to the programme, parents in Intervention B were categorized as low, medium or high in committment, based on their participation in workshops and their comments in the final interview about the value of the programme to them. Children's scores ranged from 11.66 for the group whose parents had a low level of committment to 20.66 for the group whose parents had a high level of committment (children whose parents had an average level of committment scored 16.57, on average). However, the children of parents whose level of committment to the programme was high, scored lower than the children in the school-based intervention programme (Intervention A).

More important than the amount of time spent with the children playing number games and reading number books is likely to have been the involvement in the school-based intervention programme of research assistants who were experienced teachers with a background in research. Not only were these people professionals, but in the course of the project they had gained an understanding of the processes underlying the development of number concepts and skills in five-year-olds. This has important implications for the implementation of intervention on a wider scale. While supporting and encouraging parents to interact more effectively with thier children is highly desirable, total reliance on this form of intervention could lead to further disadvantage for those children whose families cannot, for one reason or another, participate in a special programme. It is essential that teachers themselves take major responsibility for programmes of this kind and that they come to understand the kinds of processes which underly the development of mathematical thinking.

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# MAKING CONTACT IN THE JUNIOR SCHOOL: PRACTICES OF COLLABORATION BETWEEN PARENTS AND SCHOOLS

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## INTRODUCTION

The importance of parent involvement in schools, as a component of effective schooling has been variously noted (e.g. Fullan, 1985; Hawley & Rosenholtz, 1983; Purkey & Smith, 1983). Reviewing two decades of research, Epstein (1987) concludes "the evidence is clear that parental encouragement, activities, and interest at home and participation in schools and classrooms affect children's achievements, attitudes and aspirations, even after student ability and family socio-economic status are taken into account" (p.120). When parents encourage and support their school activities, children are advantaged; the level of contact between the home and school is positively correlated with academic achievement (Dornbusch & Ritter, 1988; Iveson, 1981).

Getting parents involved in school activities is important for several reasons. One is that it may enhance home support for learning activities in that the school may more readily find ways to help parents work with their children at home (Epstein, 1991). In a recent review of the antecedents of illiteracy, Fox (1990) concludes that schools cannot teach children to read and write without a lot of teaching and learning at home. Results from a study by Tizard and colleagues (Tizard, Blatchford, Burke, Farquar & Lewis, 1988) suggest that the only factor significantly related to children's progress in reading and writing over a three year period at infant school was contact with, and knowledge of, the school.

Another reason for getting parents involved is to try to bridge the gap between the child's home culture and the culture of the school. Discontinuity is a factor that places the young child at risk of illiteracy (Brophy, 1990).

Finally, parent involvement is also important because it affects a teacher's perceptions. Teachers are less willing to help parents engage their children in learning activities at home when they believe parents are not interested in their children's education (Epstein & Dauber, 1989). Also, there may be teacher expectation effects advantageous to the children of high contact parents (Toomey, 1989).

There are a number of parent involvement roles, from passive recipients to coproducers of education. Schools offer differing opportunities for parent involvement. The most common are invitations to come to the school, to attend information sessions, to take part in classroom activities or trips, to fund raise or for informal social activities. The parents more likely to respond to such invitations are those with the time; those with confidence in their own role in their children's education and those culturally less distant from the teacher or school. As parents like this are probably already helping their children achieve, such children are doubly advantaged (Toomey, 1989).

According to Rasinski (1989), the key to any successful parent-school collaboration is giving parents a meaningful role in planning and implementing school programmes. However, emphasising the need for parent involvement by requiring participation in organisation structures which may be foreign to many parents (Malcolm, 1983, cited in Toomey, 1989) may simply widen the inequalities (McLeod, 1989).

This paper will examine how primary schools, particularly at the junior level, are negotiating this process of parent-school collaboration. It will look at the roles for parents that professionals seem willing to countenance and, conversely, what parents see as appropriate. It will describe the present range and levels of contact; how open primary schools are to information flow and how much effort is being expended in developing home-school relations.

## METHOD

**Sample**: The sample of year one (J1) teachers and parents, whose data provide the bulk of this paper, were part of a larger study involving 20 primary and 18 secondary state schools in

Auckland. The schools were randomly selected in proportion to numbers in the four city areas of greater Auckland. Seven primary schools declined to participate and were replaced with the closest school from the same geographical area.

In total, 38 principals, 101 teachers (one J1 and one S4 from each primary and two F3 and two F5 from each secondary school), 38 Board of Trustee chairpersons and 231 parents were interviewed. The school levels were chosen deliberately as times of likely maximum contact between the school and parents. For both J1 and F3 parents, their children are beginning a new phase of their education. Standard four was similarly seen as a year where parents may perceive a transition in terms of their child's schooling, while the school certificate year is a major attempt at national assessment of academic achievement.

Principals nominated the teachers and if there was more than one at any level, then the most experienced was approached. The parent sample was gained by each teacher nominating three parents of children they taught. These parents were to be from different categories, namely, one parent with whom they had "good" relationships, one parent with whom they had little or no contact and one parent with whom they had "difficult" relationships. So, the majority of the sample were in some way problematic. The teachers were free to interpret the categories, given the brief that the larger study concerned the nature of collaboration between schools and their communities. Not surprisingly, the parents whom teachers described as "no contact" and even some of those described as problematic proved extremely difficult to contact. The actual sample of J1 teachers was 19 and interviews were finally obtained with 49 parents (an 86% success rate).

**Interviews:** The interviews covered discrete areas of school practice selected as exemplars likely to be sensitive to variations in styles of collaboration. These areas concerned beliefs about parent role; about involvement in discussions and decision making concerning curriculum, pedagogy and rules and discipline; about the nature and importance of home-school contact;

about visits to the school and the procedure for parent-teacher contact as well as more specific questions about the last contact and about reading (J1) or homework for older children. (The data concerning sending books home to read will be presented in a forthcoming paper: McNaughton, Parr, Timperley & Robinson, 1991.)

The majority of questions were posed in an open-ended fashion and interviewers both coded responses and recorded verbatim where necessary. Other questions provided options or asked for ratings and numerical judgements.

## RESULTS AND DISCUSSION OF THESE RESULTS

The larger study has yielded a wealth of data. The data reported in this paper deal largely with contact between the school and parents/major caregivers of J1 children in the first term of the year. However, at times, comparisons are drawn with other stages of schooling to set these data in perspective.

### Role of parents

What is the most effective way for parents to be involved in their child's schooling? The vast majority of all groups in the study saw the parent's role as one of support to the child or school. Parent's comments included "be there for the child", "take an interest" etc. Only four principals, three teachers and two parents, both, significantly, J1 parents, saw parents in a teaching role. (Four primary and eight secondary parents saw no role for themselves in their child's schooling.)

A series of questions was asked regarding the relative position of Board of Trustee, parent and professional input to both discussion and decision making in three areas, namely, curriculum, pedagogy and rules and discipline. Teachers of J1 believed that parents should be involved in discussions in the area of rules and discipline (84% thought this) and curriculum (68%). But only 21% were willing to allow parents to paricipate in discussions about how things are taught. This is significant in view of the research which demonstrates that ethnic minority children progress better when the processes of instruction are changed in subtle ways which make them more culturally congruent for the learners (Au & Mason, 1981; Tharp, 1988).

It is interesting to note that secondary teachers were a more like-minded group than primary teachers. Our data on discussion and decision making yielded quite different patterns of responses for J1 and S4 teachers. Generally, the J1 teachers were the more reticent about involving parents, especially in decision making. Over half of them either thought that the parents should have no say at all or that the professionals should make the decision with regard to curriculum. This rose to 89% when it came to decisions about how things are taught. Only in the area of rules and discipline were over half the J1 teachers willing to countenance parents, or rather their representatives (on the Board of Trustees) having an equal say in decision making. To J1 teachers, decisions in areas of curriculum and pedagogy are the province of professionals. In the latter, they do not even see input in the form of discussion as appropriate. This unwillingness to yield parents meaningful roles, together with the view of the parent as support, not alternate teacher, implies that a vast educational resource is untapped.

This is not to imply that parents uniformly favoured participation. They did not see their involvement in discussions or decisions about pedagogy as any more appropriate than the teachers did, but most parents favoured their participating in both discussions and decisions about curriculum and rules and discipline.

The aggregation of responses for all primary schools or for all teachers suggests a consistency of response not necessarily evident when individual schools are analysed. Obviously the small sample sizes from each school are an impediment to generalising about between and within group differences in a single school. The limited data show that in several schools there was an apparent lack of agreement between principal, Board of Trustee chairperson, teachers and parents as to parent roles. In two schools the professionals (principal and teachers) considered that decision making should be shared. In one of these schools parents endorsed this but the chair of the Board of Trustees thought that either the professionals or the Board should make all decisions. In the other school the parents did not share the professional's belief that they, or the Board, should be involved in decision making. In yet another school it was the principal who was at odds with the other interviewee groups in wanting decision making by professionals, while another principal wanted to share decision making but the parents and teachers wanted the staff to make the decisions.

If these inconsistent responses accurately represent the views of the groups involved, it would suggest that schools are likely to experience considerable difficulties in the resolution of contentious issues. If there is little agreement about who should make the decision, it is possible that the content could lead to controversy!

**Opportunities for contact**

There was certainly the potential to establish the flow of information, as a first step in helping parents find ways to work with their children at home and in reducing the gap between home and school. There were many functions for parents organised in primary schools, on average 11.5 per school in the first term. Almost all primary parents said that they felt very welcome at the school and J1 parents were no exception. Nearly all said they regularly received school to home communication in the form of a newsletter and felt that they had been invited to the school. Most (92%) had availed themselves of the opportunity to visit the school by attending at least one function there. (Recall that the sampling method employed asked teachers to nominate a parent with whom they had no contact. This was inordinately difficult for most J1 teachers!) More J1 parents were in evidence at functions than any other group. (The comparable figures for attendance at at least one function were 77% for standard four parents and 69% for secondary parents). This held for the majority of the varied types of functions held. Only at report interviews did secondary parents exceed J1 parent's attendance and at curriculum meetings where standard four parents were most highly represented.

Both teachers and parents of J1 expressed a preference for a certain type of contact opportunity. Teachers thought informal contact, both impromptu and arranged, to be the best. Parents, too, preferred this type of contact. As well as providing the bulk of attenders at school functions, J1 parents also held the strongest views about what they did not like going to. A quarter of them reported that they did not like PTA (or similiar), fundraising or special group meetings.

Teachers were asked as to the frequency of parent help in the classroom and about what the parents did when there. As would be expected, the J1 teachers reported the lowest number of instances of no parent help at all in the classroom. However, four classes were in this category but, unfortunately, we do not have the reasons for this. The majority of J1 classes (11 out of 19) had one or several parents every day or some days. These helpers either worked with children solely, or both worked with children and helped to prepare materials. The extent to which these helpers were the same few parents is unknown although, on the basis of other research, the number could be relatively small. Epstein (1987) reports that 70% of parents in her study had never helped in the classroom or on trips and such like.

The main reasons given by J1 parents for attending functions or activities were to show an interest in, and support for, the child; to offer help or give support, and to find out about the school or child.

### A specific contact occasion: Information flow

Parents and teachers were asked a series of questions about the last parent-teacher contact. These questions were designed to probe the direction of information flow, the relative influence of the participants and the reasons for contact. The major purposes of contact between J1 parents and teachers were to build a relationship for student support (31%); for the teacher to obtain information (26%) and for the parent to obtain information (23%). Unusually, as the literature would suggest that information commonly flows from teacher to parent, the J1 teachers more often reported that they found out something they did not know before, than did parents.

According to Tangri and Leitch (1982), a contact is of limited value if there is only information exchange, so participants were asked about requests for changes and about action taken. As both parent and teacher were asked about the same situation, it is interesting to compare perceptions. Only a small percentage of J1 parents (15%) felt that they asked for some form of change and the teachers agreed that requests were at about this level. Most teachers reported that they complied with requests but not all parents agreed.

About 40% of J1 teachers felt that they had asked parents to make changes, particularly in relation to child management. However, parents recalled only about half this number of requests. Most parents felt that they had complied with teacher requests but teachers considered this compliance rate to be closer to 70%.

Parents were generally more satisfied with the contact than teachers. With regard to the effectiveness of this contact for assisting understanding of the student, only about half of the J1 teachers felt that the contact was very effective and 20% rated the contact as very ineffective. The average rating for perceived effectiveness given by J1 teachers was lower than that given by S4 or secondary teachers. It may be that parents of older children, who more often reported asking for changes to be made, had more concrete suggestions and plans of action to offer, rather than simply offering information.

Principals were asked about the educational benefit of parent teacher contacts they arranged. Similarly, parents and teachers were asked to outline the main purpose of their contact. The data suggest a difference in perception. Principals and teachers appear to value contact as a way of finding out about the child, yet parents rarely mentioned that their purpose was to give information. Parents of primary children stated that their main purpose for most contacts was to support either the child or the school. The third most frequently cited reason was to receive information. Although primary teachers said that the main purpose for contact was to receive information about the child, they also mentioned giving parents information and building a relationship for child support.

A consideration of the influence process, as described by teachers and parents with reference to their last contact, suggests that the flow of information is as the professionals perceive it. In other words, they gain more from the contact than the parent. It may be helpful to parents to have the professional's purpose stated more explicitly and for parents, in turn, to be given an opportunity to articulate their aims for the contact.

Even given problems of selective or defective memory, or the fairly unlikely chance that teacher and parent were talking aboout different contact occasions, it seems that within the face to face contact situation, there is the likelihood of misperception and misinterpretation.

### How to make contact

Further discrepancy is apparent in the answers to questions about the procedures to follow when making contact. Principals were asked the steps both parents and teachers should follow in contacting one another, while teachers and parents were similarly asked how they should go about contacting the other. There was considerable discrepancy between the procedures outlined by the principal, on the one hand, and the J1 teacher on the other. Standard four teacher's descriptions were similar to those of principals and, likewise, secondary principals and teachers showed close agreement. Forty-two percent of J1 teachers saw direct contact with parents as the norm, while 52% acknowledged that contact was mediated in some way, usually only if the matter were serious or the communication written. Only one J1 teacher considered that all contact was mediated. However, the comparable figures given by principals for teachers contacting parents were 35% for direct contact, 35% for some mediation and 30% for all contact mediated. The implication is that J1 staff are more open to direct contact than the principal.

It is of interest to note that the great majority (82%) of J1 parents considered that they should make direct contact with their child's teacher. A few contacted the office, but this may have been to arrange an out of hours time, as only three parents saw the route as being through senior teachers or the principal. Fifty five percent of principals saw direct contact of parents with teachers as the norm, with 25% wanting some mediation and 20% wanting all contact mediated.

When reported data are considered for individual schools, there was a greater discrepancy between the understanding of the procedures by principals and teachers, especially if the perceived policy, on the principal's part was one of mediation of contact. Given that principals and teachers often disagreed on what the school policy was, how would parents know what they are supposed to do? If parents are uncertain about their role and status, such inconsistencies do not help the development of home-school relations. The fact that 65% of primary principals considered it desirable that contact be mediated in some way and gave clear rationales for this, like "If there is potential conflict, it is better to deal with it officially" and "Young teachers might do something that is not very wise" seems to reflect a view of parents as a party to be negotiated with and protected from, rather than a resource to be tapped.

**Problems with contact**

Principals, teachers and chairpersons of the Board of Trustees were asked about the main problems they had encountered in developing effective home-school relationships. The coding scheme reflected the degree of responsibility or blame the respondents attributed to the school or the parents. The majority of Board chairs attributed the main problem to parent apathy, while primary principals and teachers were more circumspect and responded across all categories. Teachers of J1 mentioned practical problems for them such as logistics, time etc (4), while recognising that these also existed for parents (2). Six teachers mentioned attitude problems on the part of the parent, while a further five talked of communication problems like language and cultural differences.

## Effort and benefit: Home school relations

While the importance of good home-school relationships was universally acknowledged, and while there were a variety of opportunities for parents to visit the school, and they did come, the rating of the amount of effort put into establishing good relationships did not necessarily square with these data. On a scale where "1" indicated a lot of effort, "3" moderate effort and "5" little effort, the average rating of effort from primary principals was 1.5, from teachers 1.8 and parents rating of the school's efforts was 1.9. Although these figures are complementary, Table 1 shows that they are lower than the ratings for the importance of good home-school relations. The table also shows that the perceived level of benefit from this effort was lower again.

Table 1: Ratings of importance of, effort directed to and benefit from establishing good home-school relations: Primary schools

| | principal | teacher | parent |
|---|---|---|---|
| importance | 1.1 | 1.1 | 1.2 |
| effort | 1.5 | 1.8 | 1.9 |
| benefit | 2.0 | 2.1 | n.a. |

## CONCLUSION

The data appear to present many contradictions. Junior classroom teachers seem to have an open door policy. More perceive contact as direct than at any other level of schooling, and nearly all of their parents see direct contact with the classroom teacher as the norm. Their open door policy is taken advantage of. The classrooms of J1 teachers receive more parent help and many more J1 parents visit the school and come to more of the functions that the school organises than parents at any other level.

But, ironically, parents do not seem to be regarded by the professionals as anything remotely bordering on equal partners. Parents are not seen as alternate teachers, but then nor do they view themselves as such. Yet the importance of the home in literacy learning is widely acknowledged (Fox, 1990). Teachers are seen as, and see themselves as experts, and this contrasts with parents who are seen as having little to offer to discussions of curriculum or matters of pedagogy. The latter is particularly disturbing in view of the cultural composition of our schools. Where minority groups are underachieving, pedagogy, classroom practice, should be a major area for parent input. It is particularly important in the transition to school year to ensure that, as far as possible, classroom culture melds with that of the home on pedagogically important and effective variables. Parental collaboration would seem a logical first step.

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# PLAYCENTRE - A VOLUNTARY ORGANISATION?

Coralie Minneé and Jane Couch
The New Zealand Playcentre Federation Inc.

## Background Information

Playcentre started during the 2nd World War as a support for families, and has developed into an internationally recognised early childhood movement unique to New Zealand. The original innovative philosophy, based on child-initiated play and importance of parents as educators of their children, today continues to be the foundation of New Zealand's 616 Playcentres.

The real strength of Playcentre is that it is a voluntary organisation, where parents work on a co-operative basis, sharing the responsibility for establishing, organising, supervising and maintaining the Playcentre.

Playcentre offers families a unique early childhood experience with opportunities for parents and children to learn together.

## Playcentres Focus on Family

> Playcentres are a family concept. It is not a care centre, a minding centre, a garden for children, a nursery, or a creche. Families meet other families and there is focus on the family. No one is teacher, all are learners. No one is taught, all are learning. No one knows, all are enquiring. No one is grown, all are growing. No one has curriculum, all are resources. No timetables, nor subjects, all think together on questions of significance to each. (A. Grey)

In Playcentre, the parents decide for themselves how their Playcentre is to be run, and so remain fully responsible for the education of their children. Our experience is that when the right to make decisions is taken away, people lose interest and turn away.

The policies are a consensus. The effect is a commitment to working on behalf of Playcentre, a feeling of belonging, and a spirit of vitality in the group.

What really counts is committed leadership, and that can't be bought. Everyone takes up some aspect of leadership.

There is no salary or promotion structure to keep people entrenched, so leaders remain only as long as the group desires.

Playcentre has always had as its fundamental belief that parents are the most influential teachers of their young children. For this influence to have maximum positive effect, parents must first affirm themselves as competent and confident people. The emergent leadership and the self-esteem which develops among the adult members of the Playcentre movement is the most important factor in the continued future of the organisation.

## The Impact of Policy Change on the Playcentre Movement

The most significant change influencing Playcentres arose from the changes brought about by the Picot Report, that all early childhood education centres could elect to become chartered and to be funded on the basis of the number of children using the service.

***Funding.*** The new funding formula gave grant increases for those centres operating more than two sessions a week for more than fifteen children. Those with one or two sessions a week and with less children attending sessions were disadvantaged.

Some regional Playcentre Associations with a high proportion of small/rural centres have less funds from levies to provide support services. New funding policies removed the 4/5ths building subsidy that was provided by the Department of Education, so Playcentre Federation set up its own Capital Works Fund to help member Playcentres pay for new and improved buildings.

***Charters.*** The process of chartering was a good thing for Playcentre to do, as we have been able to see how effective we are in providing a service for families. However, it was initially quite a daunting experience - but in the end, a very positive one. The only shame was that legislation wasn't sorted out before we were told to begin the process . . . and that caused much frustration, as time was needed to re-process again!!

***Minimum Standards.*** Playcentres supported the intention of the Before Five policies, but challenged the introduction of minimum standards that would cost large amounts of money to implement, and some which could threaten the organisation's philosophy of parents as educators and providers of play sessions.

Over the last two years, the minimum standards/requirements have changed and, once again, time and effort was spent sorting this out. This added much strain on already stretched resources and centres did close during this time. Time-lines were set . . . then changed. Minimum standards were reached . . . these then changed. Energy was at an all-time low.

Playcentre's flexibility has been hampered, due to some of the standards/requirements being imposed on us, and has left us with a feeling of powerlessness. There has been consultation, but the bottom line has always been the minimum standards . . . and, oh, wouldn't it have been much easier if we didn't have to deal with the differing interpretations throughout the country!!

***Training.*** A points system was set in place, and much time was spent establishing how our original structure could fit in with the new points. . . . This was achieved, after numerous centre, association and national meetings.

Playcentre training is now seen in the community as equivalent to other training, and the pressure and demand to do our training is great. People who are not parents want to do our training, because it is of a high standard, and a low cost to the trainee. With these trainees, it is the initial needs of the adults which have to be met . . . and this puts a great strain on our organisation. Our 'trainers' are also voluntary. Can we expect them to undertake additional workload for little or no direct benefit, either for themselves or Playcentre?

Playcentre parents on the other hand are able to find out how to use everyday events and occurrences to enrich their children's living and expand their ideas. It's a skill you can carry on when children are at school. If this is part of our basic understanding, then surely people coming to do our training from outside, miss out on a very important part of the whole Playcentre philosophy. They have no children of their own at the centre to share these experiences with.

To meet licensing requirements, many centres are finding the only way to get enough supervision points is to pay supervisors, and so there is the tendency to look to the one person, and thus the focus for 'all in training' diminishes. The focus of the centre changes from a voluntary body, to a paid person and an unpaid team. Often the session planning and running of the sessions is left to the paid supervisor. We are aware of the benefits of a trained supervisor, but also believe very strongly that parents are the first and best educators of their children.

A focus on who has the points means there is more pressure on doing the training for the end result, and this goes against our emphasis on time to train when ready. Also, we tend to look for individuals who have the points, rather than all being equally responsible, thus empowering people to train.

***Emergent Leadership.*** As a new parent, people generally start with a small job and are supported while doing this. From there, as their confidence grows, they are encouraged to take on another role . . . this is emergent leadership. Training is also done in the same supportive way, with new parents encouraged to learn more, and continue in their training, in turn becoming tutors and taking on leadership roles.

Positions within Playcentre have become more complex and time consuming. People are now reluctant to move into new positions, as they see the job as being too great.

***City/Rural Centres.*** Under the present system of funding, small rural centres are greatly disadvantaged. The costs of running and maintaining centres are the same. However, travel costs will be far greater for these centres and for association people supporting them. The government was to introduce 'weighting' for these centres, but this has not happened and Playcentre Federation has set up an Equity Scheme to more fairly share money being received by Playcentres on a national basis . . . as the need was urgent!! Centres had already closed and more were about to!

The resources for rural centres are stretched and these families do not have the many support networks that are available to city centres.

***Resources.*** People are our best resource, but we have to nurture them. More parents are returning to the paid workforce, and more fathers are joining our numbers. We have a much higher turnover of parents than we did in the early years, and this puts greater stress on those in Playcentre.

Many are job sharing within Playcentre and this also demands good co-operation and communication skills. There are far more meetings and liaison with outside organisations . . . and to maintain good communication with all, greater effort is required, and this is coming from demands outside of the normal running of the Playcentre.

Playcentre demands a lot of parents' time and, in return, it provides us with many skills - those of leadership, management, observation and relationship skills.

***Regulation vs Philosophy.*** The regulations were brought in with good intentions:

1. To raise the standard of early childhood education.
2. To promote equity throughout early childhood.

We have felt strongly that many of the minimum standards are not realistic for sessional centres, where parents are actively involved with their children. For Playcentre, we have struggled with the fact that these regulations tend to make all early childhood fit a certain mould and the very different and special features of each early childhood organisation have had to be fought for. Energy sapping for many!

Government's concentration on children neglects one of Playcentre's underlying principles - that parents want to learn alongside their children.

***Summary.*** There are positive effects that "Before Five" policy has had on centres and associations, but the money and time involved in implementing them by deadlines has taken its toll, putting additional stress on parents and voluntary personnel.

Can we be Playcentre without being voluntary?

# STAFF - PARENT PARTNERSHIP IN INFANT CARE

Raewyn F. Penman

Vital aspects of the staff-parent partnership in infant care are informed communication and the sharing of appropriate information. There are five general principles which are crucial to informed communication between caregivers and parents. They are:

(i) Establishing good caregiver/parent relationships.
Before informed communication between caregivers and parents can happen both parties need to trust each other. Trust in the sense that parents feel caregivers are going to be honest about their child. Also trust that information from the parent and about the child and family will be treated confidentially. Another aspect of good caregiver/parent relationships is that caregivers are consistent in their attitude to the parents and the manner in which they approach and communicate with the parents. Social family/caregiver get - togethers can help caregivers and parents see each other in different roles and can help foster good caregiver/parent relationships.

Daily communication - caregivers should make a point of greeting all parents when they arrive. Talking to them about the infant's evening and finding out any information which is relevant to how the child will behave during the day. They should also be ready and prepared to take the time to listen to parents queries and complaints with understanding. When the children are collected at the end of the day/session the personal approach should again be used. The infant's principle caregiver, if possible, should discuss the infant's day with the parents. It is also a good idea to ask the parents how their day was and show a genuine interest in them as people. Part of the daily communication could also include introducing parents to each other so that they can form relationships with parents of other children. People who have similar needs and interests.

The personal approach between caregivers and parents can also help build an understanding of cultural differences. This could be done through discussing the parents expectations and any particular cultural practices or concerns. An example is a parent's concern about speaking his native language at home when the infant was at the language acquisition stage. Caregivers should be aware of cultural differences in communication and body language when talking to parents from different cultures. This could include appropriateness of eye contact, the distance required for personal space and an awareness of how clearly your message is being communicated.

(ii) Objective information.
When talking to parents about their child, caregivers should be as objective as possible. Rather than making comments like "Matilda's language is alright", a caregiver should make a general statement backed up with specific examples or reasons, for example, "Matilda's language development is progressing well, she makes many one- and some two- word utterances. This is appropriate to her age".

So that caregivers can give objective information accurate records should be kept. These records should include information about the infant's daily activities; play, eating, habits, sleep/rest, and toileting. Information from observations of the infant should be kept with notes on the infant's physical, intellectual, emotional, social and language development. These records need to be accessible to all caregivers and the infant's parents so that if a parent has an enquiry it can be answered or addressed by whichever caregiver they approach. Caregivers should also meet regularly to discuss children's progress and together with the parents to discuss whether the centre is meeting the children's needs.

(iii) Parental/whanau involvement in the programme.
This is not only important to the caregiver/parent relations but also seems to influence how well the child settles at the centre and the quality of the communication between the caregiver and the child, as found by Smith and Hubbard (1986), (cited in Reading 2, Study Guide 3). A number of assumptions can be made about the importance of parent involvement. Some of these are; that the relationship between parents and children is the most enduring relationship the child will have and as such the significance of it cannot be underestimated; parents are the child's most important teachers; the gap between the home and the centre can be bridged through parent involvement which can also promote mutual respect and understanding; parental involvement of the parents in

the decision-making process makes achieving accountability easier. These assumptions are also appropriate to the extended family/whanau. Involvement of the extended family helps them accept and understand the parent's decision to use childcare. The whanau is also an important part of the child's life and as such, involvement with them helps the caregivers understanding of the infant.

(iv) Understanding the parents' perspectives and needs.
The caregivers should attempt to get to know the perspectives of the parents. This is especially important when infants are in childcare as parents have a number of concerns and pressures that caregivers need to be sensitive to. This can include such things as society opinions, pressures from extended family members and employment concerns and stresses. Caregivers must attend to the parents needs and by doing this will be able to give meaningful and desired information. This also includes understanding different cultural perspectives and needs.

(v) Caregiver/child relationships. To aid informed communication between parents and caregivers as well as to provide quality care, caregivers should be really interested in and concerned about the care and education of each child they are responsible for. Each infant should have a principle caregiver who has major responsibility for the care of the infant and can thus establish a continuous relationship with the infant and with the family. This continuous relationship will help the caregiver; have a deep knowledge of the child; be sensitive and familiar to the families needs; and establish a quality caregiver/parent relationship.

An open flow of communication is important to the baby's development.
An open flow of communication aids the settling of the baby into the centre. It also means that the caregiver is more able to cater for the baby's needs. Routines in terms of feeding, sleeping and comforting procedures that have been established in the home environment can be carried on in the centre if these are communicated to the caregiver. This provides consistency which is vital to the baby's development. Good communication is also important in that is reassures and relaxes the baby's family putting them under less stress in turn the possibility of transmitting stress to the baby is reduced.

Healthy development is impeded if information is not communicated.
If information is not communicated then there is a risk that the caregiving practices of the home and the centre are inconsistent. This could lead to the healthy development of the baby being impeded. Some examples of this are; if feeding schedules, types of food and quantities eaten are not communicated from home to the centre or from centre to home then the baby's diet may be imbalanced thus affecting her development; sleeping times and lengths not communicated between home and centre and vice versa could lead to the baby having inadequate rest which in turn would affect her general behaviour and development; and health problems could go undetected for a long time if information about the bladder and bowel movements are not related from centre to home.

A plan for record-keeping and communication that could be used in a full daycare situation.

(a) Enrolment Form
- to be filled out by the parents and discussed with the Supervisor or filled out by the parents and the Supervisor together.

(b) Infant's Individual Folder
Form One:
INFANT'S USUAL ROUTINES AND HOME CAREGIVING PRACTICES.
- this should be filled out by the principle caregiver and the parents together. It is then kept in the front of the infant's folder so that the information is easily available to other caregivers if the principle caregiver is away.
- this form should also be updated when necessary.

Form Two:
INFANT'S DAILY RECORD.
- this is to be filled out by the parent or principle caregiver for the overnight information and the principle caregiver for the information for the day.
- at the end of the week these daily records would be transferred to the infant's master file.

- relevant comments on play and observed progress would be put on a Developmental progress record.

* NB. The individual file should be used in conjunction with personal communication NOT in place of it.

(c) Centre Records
- as attached
- designed to make information easily transferred to the infant's individual folder at the end of the day.
- transferring this information on to the individual folder means that parents and caregivers have only to look in one place for all the information required.

(d) Communication
-this starts with the enrolment and settling-in procedures which involve the supervisor, the principle caregiver, the infant and the family.
- daily communication both on arrival and departure between the principle caregiver and the parents happens in conjunction with the use of the infant's individual folder.
- family/staff social get-togethers perhaps in the form of a family pot-luck tea termly aids communication.
- staff/parent/whanau discussion of the infant's progress can happen at more individual meetings 6 monthly or as required by parents and staff.

The plan for communication and the records does allow for cultural differences. An important part of catering for cultural differences is the adaptability and flexibility of the caregivers. This should be reinforced when employing staff and at staff meetings as well as with in-service training.

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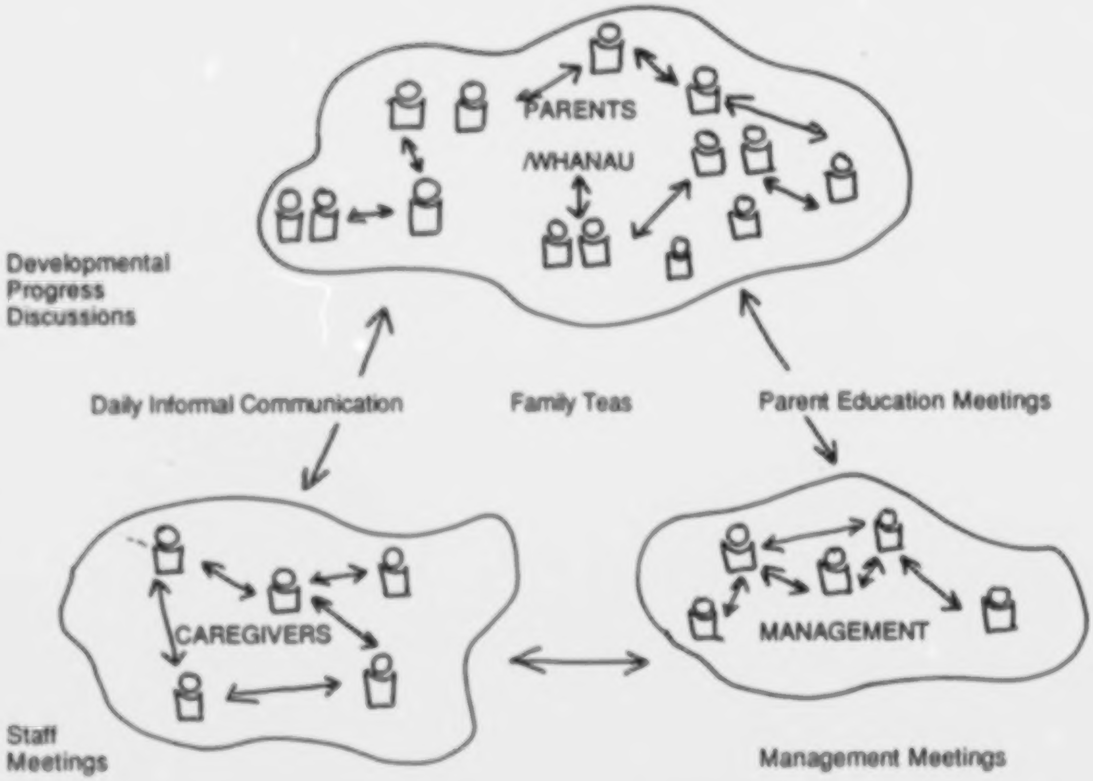
A.S.T.U. Working with Under Two's, Study Guides 2 & 3

## COMMUNICATION IN THE CENTRE


PARENTS
/WHANAU
Developmental
Progress
Discussions
Daily Informal Communication
Family Teas
Parent Education Meetings
CAREGIVERS
MANAGEMENT
Staff
Meetings
Management Meetings

## CENTRE RECORDS:

INDIVIDUAL:

- Enrolment Form #
- Infant's Usual Routines & Home Caregiving Practices
- Infant's Daily Record
- Observation Forms #
- Developmental Progress File #
- Master File (containing #)

CENTRE:

- Nappy Changing Information
- Infants' Feeding Chart
- Medication Chart
- Accident/Illness Book
- Attendance Roll
- Quick Reference Index Cards

## CENTRE RECORDS

* At the nappy changing bench -

Nappy changing information:

| Name | Time | State | Time | State | Time | State | Time | State |
|---|---|---|---|---|---|---|---|---|
| *John* | *10.00* | *D* | *11.30* | *X* | *12.45* | *W* | | |
| *Sarah* | *10.30* | *X* | *11.45* | *D* | | | | |
| | | | | | | | | |

KEY: W = wet X = soiled (dirty) D = dry

* In the kitchen -

Infant's Feeding Chart

Date:

| Name | Time | Foods | Eaten | Time | Foods | Eaten | Time | Foods | Eaten |
|---|---|---|---|---|---|---|---|---|---|
| *Amy* | *9.03* | *Cereal* | *15g* | | | | | | |
| | | *juice* | *10 mls.* | | | | | | |
| | | | | | | | | | |

For excellent ideas for other centre records such as; Medication Chart, Quick Reference Index Cards, and Child Observation Forms see Handle With Care. A Guide to Early Childhood Administration. by P Sebastian (1983) AE Press, Melbourne, Australia.

# INFANT'S PERSONAL FILE

Name: ______________________________
Date of Birth: ______________

( photo of the child could be put here )

## Infant's Usual Routines and Home Care-giving Practices

Usual sleeping times: ______________________________

Preferred position: ______________________________

Comforters and bed-time toys: ______________________________

Method of settling for sleep: ______________________________

Feeding routines: ______________________________

Food - likes/dislikes: ______________________________

Comments: (could include care-giving practices and values parent adheres to) ______________

# DAILY INFORMATION

**Over night information**

**Sleeping**________________________________________

____________________________________________

**Eating**__________________________________________

**Medication**______________________________________

**Comments**_______________________________________

____________________________________________

____________________________________________

## YOUR CHILD'S DAY

### TOILETING

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| Time | | | | | | | | | | | |
| State | | | | | | | | | | | |

KEY W = wet D = dry X = dirty

### SLEEPING

Time ____________ Length __________

____________ __________

____________ __________

Comments ______________________________________

____________________________________________

### EATING

| time | offered | ate | time | offered | ate | time | offered | ate | time | offered | ate |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | | | | | |

### PLAY EXPERIENCES INVOLVED IN

____________________________________________

____________________________________________

____________________________________________

____________________________________________

____________________________________________

### Developmental Progress Observed

____________________________________________

____________________________________________

____________________________________________

# A Model of Integration - Key Factors

Margot Mitchell
Co-ordinator
Southern Child Care Support Program

## The Southern Child Care Support Program -Background

The Southern Child Care Support Program (the "Program") was established in October, 1986. It is funded by the Commonwealth Department of Health, Housing and Community Services and is being sponsored by the City of Happy Valley Council (the "Council"). The Program is managed by a community based Advisory Committee comprised of representatives from Child Care, the Council, the Program, Parents and other children's services.

The Program was established to assist the access of children with disabilities to child care services and in particular to provide support to the staff in Commonwealth-funded Child Care Centres to ensure the provision of quality care and education for children with disabilities.

Child Care Centres in Adelaide provide care and developmental programs for children aged between six weeks and six years. (some centres may not be liscenced to have children under 18 months/2 years) Children can attend a Child Care Centre from anywhere between half a day to five full days a week, depending on the family's need. Child Care Centres are used by working parents, parents who are studying or training, parents who would like,or need some time-out and for children who need the stimulation of being with other children, learning through play, and to develop independence, awareness and social ability by being with peers and other adults.

The Program currently consists of a team of four Integration Support Workers (including the Co ordinator) who are able to provide support in 27 child care centres in the Southern Region of Adelaide. The team members are all experienced and/or qualified in the areas of child development, disability and integration, and work with a focus on the whole child.

The aims of the Program include:

- supporting child care staff to develop their skills to meet the needs of children with disabilities
- supporting families in accessing child care services and other relevant services
- identifying each child's individual needs and assisting in developing appropriate developmental programs within a child care centre.

- promoting public awareness of the issues related to child care for children with disabilities and integration generally

The Program team seeks to achieve these and other aims by working closely with child care staff, families, children and other professionals.

As the Program was one of the first of its type it was able to be very innovative and flexible in developing a model under which to operate.

The Advisory Committee and the Program Team, together developed a model, over a period of time, that focuses on three main aspects, or Key Factors.

The Key Factors are :
1. The child's Social Integration
2. The child care staff's Skill Development
3. The Withdrawal of Support

The model is continually under review and evaluation, but throughout the last five years the focus on these three aspects has remained the same.

In 1990, the Department of Health, Housing and Community Services facilitated a review of the Program. The feedback received by the completion of questionnaires by child care staff, families and other professionals was extremely positive. The Review supported the Program and the model it has been developing and working to.

## Integration as a Concept

As recently as 15 to 20 years ago, most families were advised to place a child with a disability into an institution.

Since that time we have realised that many such parents lived a life of guilt and anguish and their children with disabilities lived a very narrow life, not experiencing the love and nurturing of a family and deprived of the experiences of life that the rest of the community takes for granted.

As more children stayed in the family home and became accepted and included members of their family, the issue of integration and inclusion into the community arose. The term 'integration' became very popular and various interpretations were developed. Some were:
- having groups of non-disabled children visit special schools or other facilities to do activities together.

- having children with a disability visit the neighbourhood school for some combined activities.
- developing a special class in the neighbourhood school for children with disabilities.
- putting a child with a disability in the regular classroom, but that child not participating in all academic work.

Each of these situations was fraught with problems. The children were not integrated and included, they were merely exposed to the community. There was very little opportunity for the children without disabilities to get to know the children with disabilities, or to see them as individuals.

They may have been better off than being in an institution but in many ways they were just as isolated within their local community.

If we think about how each one of us is an integrated or included person in our communities it is because we:
- have a level of social competence
- know and understand the rules and values of our community
- actively participate (or have an option to participate) in all our community offers

Most of all we have our own individual support system of family and friends, people who like us for who and what we are.

How did we achieve all this? We achieved it because we were integrated members of our community from birth.From being part of the play group, pre school, playing in school sports, going to friend's birthday parties and all the other things that kids do. We learnt acceptable behaviour, sharing concern, how to choose a friend and how to be a friend. If we had been denied any of these experiences we too would find it difficult to be an integrated member of our community. So why should we deny children who happen to have a disability these same opportunities to learn and develop as participating and integrated individuals?

The community must accept all children and meet all their needs by providing services accessible to all.All children need to be given the opportunities to learn social competence, rules and values, so they can participate in their community.

The pre school years provide valuable opportunities to begin facilitating this, to provide a solid base from which a child can grow and develop.

The Southern Child Care Program believes that it greatly influences and achieves the integration of children with disabilities into the community. through the model it practises. The Program aims to provide a solid base of social competence. learning of rules and values from which it is hoped the child will be able to grow and develop and be included in his/her community as a participating individual.

As mentioned above the three Key Factors of this model of integration are:

## 1. The Child's Social Integration

The basis of social integration is the giving to a child who has a disability the opportunity to observe, model and practise social skills. It provides the child with opportunities to learn about him/herself and to learn about others.

It is through social interaction and integration that children learn about sharing, turn taking, acceptable behaviours, communicating and making choices and decisions which assists in the development of independence.It promotes the development of a positive self concept which Hogben and Wasley(1989) say "is vital to the optimum development of the individual"(page 30)

The Program strongly believes that the development of social interaction between children with disabilities and other children and adults will provide the child with a basis from which to learn about him/herself, others and provides the child with the ability to learn from the routines and activities of the child care centre (the "environment").

In discussing the importance of social play or interaction, Jeffree, McConkey and Hewson (1979) state that it is "vital to all children's development, handicapped or not"(page 136) and continue to make points that social play:
- encourages children to learn from other people
- develops the child's ability to communicate
- makes the child more sociable
- helps the child to develop friendships

After 20 years of existence, the National Head Start Association of America has recognized "social competence as the prevailing goal of early intervention"(Raver and Zigler, 1991, page 7)

The Program's Integration Support Workers develop individual integration programs for each of the children they support. The integration program is developed from information collected by the Integration Support Worker largely from:
- observations of the child at the child care centre. This includes observations of the child, the other children, the staff and the general program and environment, as all these elements influence the integration or inclusion of the child with a disability into the child care centre.
- the family of the child.
- the child care staff.

- other therapists and professionals working with the child and family.

The integration program that is then developed and implemented in the centre focuses on developing social interaction between the children and staff by providing activities and setting up situations that promote opportunities for this to occur.

It is possible for an integration program based on this model to have very little focus on the child with the disability. It can be more aimed at the environment and the staff, by providing appropriate activities and promoting a positive attitude.It can be aimed at the other children, encouraging them to be good models so that the child with the disability can observe and imitate his/her peers.

The Integration Support Workers facilitate the provision or creation of an environment that encourages children to develop social competence and knowledge and understanding of the rules and values of our community.

One of the advantages of this model is that integration or inclusion into a centre is possible for all children, regardless of cognitive ability , physical ability and communication skills. All children can socially interact or be a social participant in the centre. The level of this interaction will vary from child to child. For the severely or multiply disabled child social interaction may be at the level of the other children acknowledging him/her and passing him/her a toy, reading him/her a story and including this child in conversations. For other children social interaction may be at a more involved and complex level such as social play in the home corner, game playing, turn taking and sharing.

A difficulty with this model is that there are so many influencing factors; the staff, the other children, the environment. The success of the integration program relies on all of these factors working together with the focus on social integration and a positive attitude to having a child with disabilities in the group. The Integration Support Worker has to develop strategies to ensure that all these factors are working together toward the same end.

Another concern that the Program has, which is perhaps the most frustrating aspect, is the difficulty of measuring the achievement of this model. Other integration and early intervention programs can dertermine their success by assessing the child to measure the child's developmental gains. This Program does not have such a tangible measure.

Benefits and results of our integration program will not necessarily be evident until the child is older and is included in his/her community. However, from our experience, we do believe that our type of integration program develops children's self-esteem, enhances a strong sense of belonging and social competence, which we know are important factors in developing support systems, friendships and links in the community.We also believe that once the child feels good about him/herself, has trust in others, feels comfortable and confident within the environment , the learning of other skills will occur more naturally. The child will be motivated to learn, to grow and develop alongside his/her peers. This has definitely been our experience.

## 2. The Child Care Workers - Skill Development

To achieve integration within a child care centre you need child care workers with an understanding and ability to meet the needs of children with disabilities. The attitudes, understanding and skill level of child care workers has a significant role in the integration of children with disabilities.

It is easy to see that integration, if left up to only a select few individuals , would not achieve the desired outcome of natural, long term integration and inclusion in the community. The community, in this case the child care centre, needs to be able to facilitate the integration or inclusion of a child with disabilities, as naturally as they would any other child attending the centre.

To achieve this the Program has set out to provide child care workers with the following:
- understanding of integration and the importance of integration for the child, the family and the community
- skills in observation and identification of children's individual, developmental and social needs
- skills in programming to meet children's individual needs across all developmental areas(including social)
- knowledge of specific disabilities
- skills in specific techniques and methods

The skills that the Integration Support Worker aims to develop in the child care worker will largely depend on the needs of the individual child in each support situation. The above areas, however, are encouraged in virtually every support situation.

To develop these areas, the Integration Support Worker will, as part of the integration program, set out to:
- model appropriate methods of handling the child, the environment and the other children so as to meet the child's needs

- provide direct instruction, in the use of specific equipment, communication systems and physical techniques of handling a child with a disability
- provide appropriate resources, toys, equipment and literature and assist in utilising these
- provide ideas to enhance programs and activities to promote social interaction, through written material and verbal ideas
- offer workshops on topics regarding integration issues and specific disabilities
- link child care workers into resources such as toy libraries specializing in toys and equipment for children with disabilities
- establish links and networks between child care workers and early intervention workers and therapists
- arrange visits for child care workers to observe the child with the disability during a therapy session, to establish networks and develop skills

The program is also involved in promoting the skills and abilities of child care workers through facilitating, with others, an inservice program for early childhood workers in the area of integration and disability. The Program also regularly speaks to groups of students studying Child Care at a tertiary level.

One advantage of having a focus on enhancing the child care workers'skill and knowledge base is that the subsequent children with disabilities that attend the centre will benefit from this. The Program has observed an amazing change in the attitudes towards integration and children with disabilities and an increase in knowledge and ability to meet the needs of children with disabilities in the child care sector over the past five years.

The Program is ultimately rewarded when a centre says, " we don't think that we will need support for Tommy". It is the proof that child care workers have developed to a skill level where they can confidently and competently meet the needs of a child with a disability within their regular program.

## 3. The Withdrawal of Support

Ideally, the integration process will develop to an extent where the Program's support of the child and child care staff can be withdrawn. This withdrawal process will be gradual and in some cases will never be completed. But a lessening of support can be achieved within a suprisingly short time.

The program aims to withdraw support to minimize the possibility of the child and/or the staff developing a dependency on the support. The Program encourages the child care centre to not only recognize their resposibility to provide a quality service to children with disabilities but to actively achieve this. From our experience this is more likely to occur if the support is withdrawn once the integration program is achieving the desired outcome.

In deciding to withdraw, whether totally or in part, the following factors are considered:
- the skill level and understanding of the child care workers
- the social inclusion of the child with a disability. This involves the activities that are provided and whether they are meeting the child's needs
- the child with a disability's level of need
- the amount of time the child with a disability is attending the centre

We monitor the withdrawal of all support to determine its effect on both the child and the staff, by maintaining contact (whether by visiting or telephoning regularly) and can reinstate the support or some degree of support should that be necessary.

The program has observed one major benefit of withdrawing support, being that the child with the disability is seen as a true, participating member of the child care centre, by the parents , the child care workers, the other children and in fact any one who visits the centre. They see a child care group having fun, doing activities and learning through play and the child with a disability is just "one of the kids".

Of course another benefit of withdrawing support is that those support resources are available to aid the integration of another child with disabilities. In these financially difficult times, this is a very attractive element of this Program. The Program, by using this model, is able to support many children over a period of time with a relatively small team of Integration Support Workers and limited resources. Without using this "flow - through" approach we would not be able to support as many children and staff, we would be committed to supporting the same child for anywhere up to four or five years.

Over the past five years the Program has been able to extend it's geographical boundaries to move from supporting 7 child care centres to supporting 27 , with a minimal increase in resources. This is quite remarkable and has only been possible due to the model the Program works to.

The Program has acknowledged that some children will need continued support. This is usually in the situation where the child has high pysical needs, that are requiring one to one support for the child to be mobile, to participate in activities and routines. The Program also identifies that this level of support does not necessarily require an Integration Support Worker but an extra child care worker in the child care centre during specific times that child is attending.

We have been fortunate enough to pilot a small program, which we entitle "Higher Staff Ratio Support", over the last 18 months. Due to its success we are seeking additional funds to extend it and develop it futher. The concept is that in situations where the Program feels support can be withdrawn, but the child requires a certain amount of one to one support, the child care centre employs a casual relief staff person. This increases the staff ratio, to allow the child care workers the time to support the child's participation in activities and routines, and the Program then reimburses the centre. The Program's experience with this concept has to date been very positive, however a formal evaluation of the pilot has not yet occured.

## In Conclusion

The Program strongly believes that it's success in the integration of children with disabilities into child care centres is largely due to the model it has developed and works to. The model's Key Factors as discussed in this paper are, we believe the key to the successful integration and could also be developed to aid the integration of children with disabilities into other pre school and school settings. The model could also be developed to aid the integration of adults with disabilities into the workforce and other community facilities to provide opportunities for these people to be participating and included members of their community.

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# Early Childhood Teachers' Theories in Practice: What Do Teachers Believe?

Paper to be presented at the Fifth Early Childhood Convention, Dunedin, New Zealand, September 8th-13th, 1991.

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This paper reports a study conducted during 1988 which involved six teachers in two different early childhood centres.[1] It arose initially from my reflections on several New Zealand studies which reported the activity of early childhood teachers (e.g. Meade, 1985; Smith and Haggerty, 1979) as well as from my own involvement in teacher development. While a brief outline of the methodology is provided, it is my particular intention in this paper to highlight certain findings from this study and to discuss their implications for teacher educators (and in this group I include all of those who support the development of teachers, both preservice and inservice).

The purpose of the study was to describe and evaluate the 'operational theories' of these early childhood teachers. Several assumptions about the nature of educational theory and its relationship to practice underlay the study. In particular educational theory was seen to comprise teachers' beliefs which are manifest in their practice. This view differs from that evident in much of the literature in this area (eg Verma and Peters, 1974) where theory is portrayed as a body of abstracted scientific knowledge (for example, Piagetian theory) which teachers apply to their work. The beliefs informing teachers' practices were understood to relate to many things; for example, how children learn, what is valuable knowledge, what communities expect, what can be managed. Some of these beliefs will be more powerful than others. Some beliefs will be implicit in action rather than the subject of active consciousness.

In the discussion that follows I will suggest that significant gaps exist in the theoretical accounts that some teachers are able to give of their own practice and that teacher educators have a responsibility to address these. Carr and Kemmis (1986, p116) argue that the answer is not to 'teach more theory' but rather to 'improve the practical effectiveness of the theories teachers employ in conceptualising their own activites'. This means engaging with teachers' existing beliefs and the manifestation of these in their daily work. This is not to say that there is no place for academic theory' in teacher education programmes, but for such theory to have practical impact it must come to be 'owned' by the teacher as part of her 'intuitive' knowledge base (Lampert, 1984).

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[1] This study was the subject of an M.A. Thesis. For a full account the reader is directed to Bell, (1991).

For some of the teachers who participated in this study, the opportunity to engage with the observational data and to discuss these in the interview context prompted reflection. Some teachers realised they held misconceptions about what was happening in their programmes. All struggled to explain aspects of their practice. Sometimes a teacher's account was not congruent with her observed practice. Sometimes her account contained contradictory statements. Such contradictions were especially apparent in relation to teachers' accounts of play, which seemed to reflect both 'formal' knowledge of the kind found in text books, and 'intuitive knowledge' constructed from teachers' own personal observations and experiences. Notably it was those beliefs which fell in the category of intuitive or 'commonsense' knowledge that could be clearly seen to inform teachers' practice.

Jones (1980) claims that much of what is taught in courses of teacher education only ever achieves the status of 'formal knowledge' and for this reason is unlikely to impact apon practice. She urges teacher educators to invite teachers to explicate their own experience, arguing that

> working teachers build theory out of their experience; they don't just quote others' theory. They don't act as they do because Piaget said so; they do it because they say so; because they have observed and experienced and they know that this is appropriate (Jones, 1980, p138).

But how appropriate? And how reliable are such observations and experiences? It is recognised that teaching is an inherently contradictory activity in which teachers are constantly required to pursue a multitude of potentially competing goals and meet a range of differing needs. However it is the contention of this paper that to do so unreflectively is not to do so effectively.

It is argued here that practice is most effective when teachers are able to make their beliefs explicit. This enables teachers to evaluate the 'fit' between their intentions and outcomes, to examine the utility of their beliefs in the light of practice and to revise either practice or theory accordingly. Oberg (1986) describes this process as one in which practice is transformed into praxis, that is, 'informed committed action'. For this transformation to occur a teacher must make conscious what is often largely unconscious. It means moving beyond habit to become a reflective practitioner (Schon, 1983) who systematically observes what is happening and attempts to explain this in relation to educational goals. Such an explanation is referred to in this paper as a teacher's 'operational theory' (Hirst, 1983).

The study reported here asked the following two specific questions:

- What beliefs inform the practice of six New Zealand early childhood teachers, that is, what are their 'operational theories'?
- How adequate are these teachers' 'operational theories', that is, how do they rate as full and coherent accounts of practice?

## METHOD

The chosen methodology enabled practice (defined as the daily work of teachers in the centre or kindergarten) to be explored from the viewpoints of the children, the teachers and the observer, ultimately yielding a negotiated account. Observation of four target children in each of two settings was followed by a series of interviews with teachers and children. The teacher interviews included both structured recall relating to specific recorded incidents as well as questions which sought teachers' views of their work more generally. This enabled teachers to draw on their case knowledge (Spodek and Rucinski, 1986) without constraining their reflection on practice.

While it was the beliefs and practices of six teachers that were the focus of the reported study, it was the activities of the target children as they engaged with these teachers which were recorded during the observation period. There were two reasons for attempting to gain the children's perspective on the practice of their teachers. In both centres children were allowed to select their own activities for most of each day. The work of Wood et al (1980) suggested that teachers' decisions not to engage with some children in this context are important signposts to their beliefs. The decision to observe and interview children as well as their teachers also reflected the view that the meanings of practices are socially constructed.

### Settings

Observations were carried out in a childcare centre and a kindergarten, both near the city centre.

a) CHILDCARE CENTRE

The childcare centre is administered by a community trust and has 50 children attending at one time, 15 of whom are over 4 years and 10 of whom are under 2. (The under 2 year olds are housed in a separate part of the building.) There are in total nine full and part-time staff, five of whom work with the children over 2. They are all accommodated in a large house which has been partially modified and is made up of several rooms with a back door leading to a huge rectangular shaped play area.

b) KINDERGARTEN

The kindergarten is administered by the local Free Kindergarten Association and has a grade one classification, i.e., two groups of 40 children aged between 3 and 5 years attend for sessions of 2 and a half or 3 hours. There are two full-time staff. They are housed in a building designed for this purpose. It has one large room which can be divided by doors and a further smaller patio area through which children pass to reach the spacious L shaped play area.

Staff interviews were conducted in a setting of their choice. Five of the staff chose to be interviewed in their own homes and the sixth chose the centre. Child interviews were conducted in the centres.

## Participants

a) CHILDREN

A letter seeking permission was sent to parents of all children aged between 4 years 3 months to 4 years 9 months and who attended the centres for 12 hours minimum per week. Two boys and two girls were chosen in each of the two settings, the first of each sex randomly and the second by selecting one from the remaining pool of children who had not been observed to play with the first child. In this way the likelihood of observing teacher interaction in a range of centre areas was increased. The children selected were aged between 4 years 3 months and 4 years 8 months. Eight children were each observed for a period of 10 hours at their early childhood centres.

b) TEACHERS

Six teachers were interviewed, two from the kindergarten and four from the childcare centre.

## Procedures

The study was carried out between April and October 1988. The observations and interviews were conducted by the author, the observation and later coding completed with research assistance.

a) OBSERVATIONS

Each child was observed continuously for 20 x 30 minute periods, that is, 10 hours per child; a total of 80 hours. Where possible, the observations were carried out within a one week period, with attempts made to gather data which were representative of the child's total day in the centre. All children were observed at least twice from arrival and on departure. They were all observed throughout two of the daily staff-directed mat times and in some cases they were also observed throughout additional impromptu mat time sessions as well.

The child's language was recorded by a radio-microphone attached to a 'dress-up' jacket which was worn by the child.

The observer/s recorded:

1. All dialogue between the child and teachers and details of the context in which this occurred. (Running records)
2. Any incidents that seemed to offer insights into children's views of the staff, or the staff's view of their work with children. (Field notes)
3. Documents (for example, newsletters to parents, notices on walls) in which staff made public statements about their work. (Field notes)
4. Contextual data including the numbers of adults and children present, details of the daily programme and the weather conditions.

## b) INTERVIEWS

### i) Teachers

At the conclusion of the observational period, the six teachers were individually interviewed. The focus of the interview was on exploring the beliefs which informed teachers' practices, with dialogue about the target children allowing for exemplification. An interview schedule was used to structure the dialogue and included questions relating to centre function, teacher role, development and learning and educational goals as well as seeking teachers perceptions of their own activity and that of the target children. The interviews included opportunities for staff to comment on transcribed accounts of actual observed interactive incidents in which they had participated. Interviews lasted between one and two hours and were tape recorded.

### ii) Children

Each of the children was also interviewed. These interviews took the form of informal conversations between the author and the child in the centre. An interview schedule was used which contained questions about the child's perception of the teacher and peer activities in the centre. The interviews lasted up to 10 minutes (according to the child's interest) and were tape recorded and later transcribed in full.

## c) ANALYSIS OF DATA

### i) Observational data

Records of all interactions between the target children and teachers were transcribed in full, yielding a total of 332 episodes. After careful reading and re-reading of these data, and several attempts at ordering these, mutually exclusive categories were developed to enable these episodes to be coded according to their purpose. In line with recent ethnographic work (Corsaro,

1986) it was decided to code whole episodes rather than break them down into 'moves' or conversational turns. The categories were developed after talking with these teachers about specific recorded incidents and reflect the ways in which they described the intent of their interactions. Their use arose as an attempt to systematise teachers' interactions with children in order to identify patterns, either individual or collective, which may have offered insights into practice.

The following categories were used: Social; Plays; Describes; Monitors; Affirms; Suggests; Assists; Extends; Leads; Mat; Directs; Seeks Recognition; Seeks Access; Seeks Arbitration.[2]

Teacher verification of these categories completed this process.

### ii) Interview data

The interview data were transcribed in full and used to address the following questions:

What is the participant's view of the centre function and her own role in it?

What beliefs does she express about children's learning and development?

Descriptions of staff beliefs were then compared with the other data, e.g., staff-child interaction patterns, the child interviews and the field notes. Key words were searched (e.g., 'play', 'work') from the interactive data and their contexts examined. Finally individual case studies were prepared for each teacher.

## d) FOLLOW UP INTERVIEWS

The first draft of the case studies were mailed to each participating staff member for confirmation, disconfirmation and/ or comment. Staff were contacted by phone and offered a further face to face meeting if they wished to discuss the interpretation of the data. Four staff preferred to submit written notes and two participated in a further interview.

## FINDINGS AND DISCUSSION

While all of the teachers who participated in this study appeared to hold many views in common, there were some individual differences, more notably in what was done than what was said. The remainder of this paper will offer a synthesis of the 'operational theories' of these teachers, drawing on each of the six individual cases which are presented at length in the original study.

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[2] For a full account of these categories and the coding process, see Bell (1991).

Finally, the adequacy of these teachers' theories will be briefly discussed and some recommendations given for teacher educators.

The teachers who participated in this study (and who have been given pseudynms) were as follows:

Kim is the supervisor of the Childcare centre and holds the Kartane Diploma and the NZCA Certificate. She is aged 30+ and has had 10 years experience in childcare.

Fran is the assistant supervisor of the Childcare centre and holds the NZCA Certificate. She is aged 20+ and has had 5 years experience in childcare.

Maddy is a childcare teacher and holds a Trained Teachers Certificate (Primary). She is aged 20+ and has had two years experience in childcare.

Roxanne is a childcare teacher and is currently enrolled for the NZCA Certificate. She is aged 20+ and has had 2 years experience in childcare.

Mary is the Head teacher of the Kindergarten and holds both a Trained Teachers Certificate (Primary) and the NZFKU Diploma. She is aged 40+ and has had 12 years experience in the kindergarten service.

Amber is the teacher in the Kindergarten. She holds the NZFKU Diploma. She is aged 30+ and has had 7 years experience in the kindergarten service.

### Teachers' Beliefs: A summary

The first research question asked: What beliefs inform the practice of six New Zealand early childhood teachers? A summary is given here drawing from the case studies.

a) FUNCTION OF THE CENTRES

Five of the teachers in this study described their centre as providing a childcare service to parents. Only Mary, the head teacher of the kindergarten, described her centre in purely educational terms. The four childcare teachers identified care (attending to children's physical and psychological well being) as the first priority of their centre programme, and education as a secondary focus. They differed in this from the kindergarten teachers who identified education as their only focus. This difference no doubt emerges from the structural differences between the two settings (for example the age of children enrolled, their length of time in the centre requiring the provision of meals and sleep facilities) as well as from the differing role perceptions held by staff in the two institutions.

A high proportion of the interactions of childcare staff were focused on routines (e.g. meals, tidying up). Further, their involvement in housekeeping tasks left little time for interactions with children who were already 'managing'. This may explain why in spite of a higher adult to child ratio in the childcare centre compared with the kindergarten, the kindergarten staff had approximately twice as many interactions with the target children than did the childcare staff.

b) EDUCATIONAL GOALS

While most of the teachers made reference to the 'all round development' of children as the overriding goal of their centre programme, it was the psycho-social domain that was consistently emphasised. Social skills, good relationships, positive self esteem, 'caring and sharing', confidence and respect were stressed as the most important outcomes of the programme, with teachers often drawing on their own life experiences to support these views.

Perhaps teachers believed that it was in this developmental domain that learning could not be left to chance. For many, their stated views that children must learn respect for others or 'social skills' were reflected in a lot of interactions of a directive nature related to centre routines, particularly tidying up. The two teachers who had received least early childhood training (Maddy and Roxanne) stressed the importance of transmitting social knowledge of 'right and wrong' to children and this was the focus of most of their interactions. The term 'development' did not adequately represent the way in which teachers actively socialised children to conform to prescribed social 'norms'. For example, Mary, who expressed the view that 'children developed at their own rate', was nonetheless relentless in insisting that children conform to centre expectations in relation to tidying up, with some 10% of her interactions involving specific directions to do so. In both centres mat time served as the context for explicit instruction in social behaviour, with children being instructed about turn taking and 'polite' ways of speaking, as well as participating in directed 'caring and sharing' with children being directed to hug their peers, or clap to affirm 'good' behaviour. While all of the teachers spoke of children's development and learning being largely beyond their influence, their actions suggested that they believed teachers have a responsibility to socialise children in line with social norms.

In the context of the interview only two teachers (Mary and Fran) made mention of children's intellectual development and it was they alone who engaged in interactions coded 'extends'. Both of these teachers expressed the belief that adults could and should promote children's intellectual development by approaching busy children and inviting them to extend upon what they are doing. Their beliefs were reflected in their practice. The other teachers did not include intellectual development amongst their goals. The absence of such a focus seemed to reflect their beliefs about what is valuable (social-emotional development being identified by all teachers as the priority) and/or about children's development and learning. Some teachers explicitly expressed the view that children's learning could not be influenced by teachers, advocating adult non-intervention.

Learning 'school skills' (for example, name recognition, use of pencils) was a goal identified by all teachers, but accorded low priority both in the context of the interview and in practice. It emerged from a view of the school, frequently explicitly linked to teachers' personal recollections of schooling as an inflexible, curriculum (as opposed to child) -centred institution for which children needed preparation. While some centre practices (for example, colour recognition activities) were specifically related to school preparation, the practice of defining desired behavioural ends (for example, name recognition) was not congruent with teachers' other beliefs, notably those about what was important knowledge and how children's development and learning occurred. These practices were better explained as reflecting teachers' beliefs about the expectations of parents, schools, Ministry officers and teacher educators and the desire of the childcare teachers to improve their own perceived status. Both Kim, the childcare centre supervisor, and Maddy made this explicit in their reflections upon the practice of themes, commenting that while the staff knew that the theme content was often already known by the children they were heartened by the parents' enthusiasm for this practice. Kim described the records of the theme based programme as "something we have to put down" to meet Education Department expectations.

### c) DEVELOPMENT AND LEARNING

The terms 'develop' and 'learn' were used interchangeably by teachers but the contexts in which these terms occurred suggest development was viewed as an outcome of learning which occured through the interaction of children's experience and their physiological 'readiness'. All teachers described children as learning through interaction with the environment (specifically, the centre activities). These beliefs were evident in the 'free play' programmes which operated in each centre and are consistent with an interactionist perspective of development. Smith and Shepard (1988) define this as one point on a continuum of beliefs about development, with 'interactionism' falling in the centre and characterised by the view that development is amenable to environmental intervention while 'nativism' falls to one end and implies the belief that development is an internal organismic process. While all of these teachers believed that the environment did influence development, views differed on what might be influential, which aspects of development were amenable to influence and what amount of impact different influences might exert. Those teachers who spoke of learning through play (e.g. Kim, Maddy) also expressed the view that children should be left to get on with this by themselves. Some teachers (in particular, Amber) attributed more weight to physiological factors than did others, her view that "if they're not ready there's nothing much you can do" suggesting that her view of development falls towards the nativist end of the continuum (Smith and Shepard, 1988). In general most of these teachers did leave children to 'get on with it', intervening only to teach socially appropriate behaviour. Mary and Fran differed in that they actively initiated conversation with children with the intention of promoting intellectual development. Amber who had the highest number of interactions, alongside a declared non-interventionist philosophy, presented an enigma. This was partially explainable in the light of her view that the development of children's self esteem depended on approval from adults. Amber's inability to explain the discrepancy between her declared beliefs and actions raises questions about the adequacy of her theory.

All teachers spoke of the importance of peers as models and believed children learned by observing others. For this reason they encouraged children to play with others, although they were resigned to the fact that some children (e.g. Nell, a socially isolated child) would not be accepted by their peers. Direct instruction was also viewed as a way of influencing children's learning, with teachers holding different views about its appropriateness. Nevertheless, all teachers with the exception of Fran, did engage in significant amounts of direct instruction in relation to centre routines.

### d) TEACHER ROLE

Apart from Mary and Fran, all teachers espoused a non-interventionist view of their teaching role. While the former teachers expressed commitment to actively seeking out busy children and affirming or inviting extension of their activity, the others spoke of engaging with children only if there was a 'problem' (for example, aggressive play). Qualifying this latter view was the belief that one's influence would be in any case limited. Teachers spoke positively of accepting individual differences. These were explained by reference to two constructs 'readiness' and 'home effects'. King (1978) reported the same constructs as being used by British infant teachers whose 'child centred ideology' matched that of the teachers in the present study.

Teachers' role perceptions were generally consistent with their behaviours. This is not surprising in view of the literature which reports role perceptions to be influential (e.g. Ferri, Birchell, Gingell & Gipps, 1981). Several teachers attempted to define the term 'teacher' in a way that reflected their perception of this role as non-directive (e.g. Mary as an "interactor", Fran as a "friend"). The interactions of these teachers were consistent with their descriptions. However all teachers did engage in directive interactions related to non-negotiable aspects of centre practice (such as mat time attendance and tidying up). Several teachers (e.g. Kim, Mary) were surprised and disconcerted by the number of their interactions which had a directive focus, suggesting a gap between their intentions and actual practice. Teachers' explanations of practice stressed children's choice and they seemed genuinely puzzled by questions about what children *had* to do, reiterating that children chose their activities. Yet the children perceived their teachers as people who interrupted their activity with redirections, for example, Betsy commented "They're always getting in our way!" after a teacher's request to tidy up the family corner (Field notes: 12/8/88).

While teachers gave such directions constantly, none felt they would be justified in trying to change children's activity choice patterns. In spite of their statements about the importance of children's 'all round development', they were clearly resistant to attempting such changes. In line with the non-interventionist philosophy, the distribution of teacher attention or stereotypical activity patterns were not viewed as problematic. Teachers tended to see children's interactions with staff as largely determined by the *children* (although staff initiated 2:1) and generally expressed the view that children must be trusted to make their own choices. While most teachers said they would 'suggest' that a child try a new activity, their intervention was seen as stopping there. While Mary actually implemented a behaviour modification programme to change sex-stereotyped play patterns, this was initiated in response to a course requirement and conflicted with her belief that children should select activities only when they are 'ready'.

Behaviour modification programmes were implemented in both centres. In the childcare centre Kim gave out stars and stamps for tidying up. Because of the nature of this behaviour (conforming to social rules) she felt this intervention was acceptable. However all teachers expressed the view that definition of desired ends in relation to other aspects of children's learning was illegitimate and in conflict with such constructs as 'readiness' and 'freedom to choose'. This meant, to use the smorgasbord analogy, that while some children enjoyed a wide and balanced 'diet', others tasted just a little of what was available. Their teachers, by and large, saw this as inevitable, explaining it by reference to the child or his/her home rather than to centre practice. Teachers seemed to see themselves as relatively powerless to change behaviour learned in the home or to influence the amount of 'potential' a child might have for learning.

As in King's (1978) study, the teachers in this study subscribed in varying degrees to the view that children's 'readiness' was a prerequisite for learning and that such readiness would be identified by the child's demonstrated interest. Yet in the process of observing the daily activities of the target children it became clear that a 'peer culture' existed in which children exerted pressure on others to conform with socially prescribed norms. Children were particularly outspoken in relation to what they considered to be gender appropriate activity, their comments serving to maintain stereotyped behaviour patterns. Davies (1989) reports a similar finding from her study of preschool discourse and refers to this phenomenon as "boundary maintenance" (Davies, 1989, p41). These findings offer a challenge to teachers' beliefs that the children in an early childhood centre are 'free' to choose the activity which will best further their learning. It is also a questionable assumption that a teacher will, in fact, notice a child's demonstration of interest. Several of the target children, notably those described as 'reserved' and 'withdrawn' by staff, engaged in almost no interaction with teachers at all, except in the context of a large group in which they remained relatively anonymous.

When teachers do interact with children their beliefs about their role appear to be crucial. In this study only those two teachers who mentioned children's thinking were observed to engage in extending conversation. The others who stressed 'social development' were actively engagedin socialising children to conform with centre rules. The following incident provides an example of this.

> For several days Liam and the two friends he played with had been regularly gathering at the side of the fish tank and pointing at the 'rainbow' (created by the refraction of sunlight through the glass). They questioned each other as to how it had gotten there but no answers were forthcoming. On two occasions a teacher approached this knot of puzzling children and asked them if they had tidied up. Their interest in the rainbow was never communicated to the staff although it was quite overt to an observer. (Field notes: 19/6/88)

Most of these teachers focused on giving instruction about social norms. Despite a large literature which promotes the role adults can play in children's learning, these teachers seemed to believe that children's intellectual development would take care of itself through play. At the same time, however they they also expressed reservations about the quality of children's play, describing it as limited and repetitive. This view matched the observer's perception and, indeed, that of the children who on several occasions were recorded to comment on their play as 'boring' and the centre day as 'too long' (Field notes: 25/5/88; 27/7/88). Perhaps, these teachers simply felt uncertain about how to involve themselves. Certainly, this was the view expressed by Mary, whose attempts to 'get children thinking' were by no means well received by them. Teachers eventually dismissed the less responsive children (e.g. Neil, Paul, Mark) as 'developing in their own way', this phrase perhaps disguising their sense of helplessness.

e) PLAY: FORMAL AND INTUITIVE KNOWLEDGE

In five of the case studies, i.e. those teachers who had been formally trained in early childhood education, an apparent discrepancy existed between what teachers said about play and their actual practice. When asked to 'describe play' teachers would explain that it was 'everything a child does'. This statement was often supplemented by the further statements, 'play is the child's work' and 'children learn through their play'. This is the traditional view enshrined in the literature on children's play (e. g., Parten, 1932) and provides support for the play-based programmes offered in both centres. When play is understood to be everything a child does, developmentally appropriate, ('play is the child's work') and the context for learning ('children learn through their play) then whatever a child does at the centre has to be valuable. Yet while teachers made statements of this kind, they also qualified them by assessing some activities as more worthwhile than others. Further, in their observed practice they frequently interrupted children at child initiated activities and directed them to others (e.g. tidying up).

In practice these teachers used the term 'play' quite selectively, in relation to certain specific activities only. Not only was this the case in the the transcripts of teachers' interactions, but it was also evident in the way they spoke indirectly about play during the interviews. In each teacher's interview there were contradictory statements made about play. A different account of play was given according to whether the questions were of an abstract nature (e.g. "what is play?") or embedded in the context of practice (e.g. "what is Rose doing in this incident?"). When discussing their practice teachers spoke of play in the same way as they did in practice, as revealed by the transcripts. In the context of practice or reflection on practice 'play' meant either physical or 'pretend' activity. It had the further connotations of being child-directed and sociable. Not surprisingly, given the social context, all of the children shared this understanding, describing these same specific activities as 'play' and all other activities as 'not play'. Given these terms, in spite of teachers' espoused commitment to play, rarely if ever were they observed either to play themselves or to interact with playing children. In the 'real world' of the centres, play was understood to be something children did by themselves and which complemented those other activities which received teacher input. It could be argued from these data that the teachers, in spite of some statements to the contrary, saw play as having limited value.

How might the contradictory accounts of play be explained? It is argued here that these teachers drew on two different kinds of knowledge in their accounts of play: 'formal' and 'intuitive' (Lampert, 1984). In making the distinction Lampert says of intuitive knowledge that

> each individual builds a store of this commonsense sort of information from personal experimentation on the physical environment. Such knowledge is not usually made explicit but is often useful and powerful. It contrasts, therefore, with the formal knowledge one is taught in school: a commonly accepted set of well-articulated descriptions of experience which may have little connection with the knowledge individuals apply in their everyday lives (Lampert, 1984, p2).

Lampert's distinction is similar to that made by Jones (1981) who draws on the Piagetian terminology, 'logical' and 'social' (Kamii & De Vries, 1977) in a discussion of teacher education models. She offers the following definition of these Piagetian constructs:

> logical knowledge is constructed by the learner who generalises from repeated experiences (whereas) social knowledge is the conventions of one's culture, the names of things and rules for behaviour. Because these things are arbitrary they can only be taught directly, by telling or showing (Jones, 1981, p127).

She suggests that much of the formal theory taught to beginning teachers only ever becomes 'social knowledge', that is it is learned by rote but never integrated with one's world view to become 'logical' knowledge. In a sense, it is knowledge only of someone else's belief rather than a belief one 'owns' (that is, justifies from one's own personal experience). This is not to say that teachers who express 'formal' knowledge disbelieve what they say. Rather such assertions relate to social conventions rather than personal experience, and therefore have a different status.

Attention to the language process of the interviews offers support for this interpretation. Statements which linked play to personal experience were offered confidently and quickly, while statements of formal knowledge were expressed much more tentatively, often in 'text book' phrases and without further elaboration. Further support comes from the observation that teachers who expressed the formal account of 'play as the child's work' were unlikely to draw on this to explain or justify practice. Roxanne, for example could not explain why there was a play programme operating in the centre. None of the childcare teachers attempted to influence parents' negative perceptions of the programme as 'just play'; rather they promoted themes as a way of impressing parents. 'Play as the child's work' and 'play as learning' was part of the formal knowledge which had shaped the rules requiring centres to provide play programmes, but it was not integrated with teachers' intuitive understandings of play, understandings which were shared by the children in the centre.

While the programme structure emerged from the formal view of play as 'everything children do', teachers' actual interaction patterns were consistent with their intuitive views of play as an activity which children engaged in collectively and which centred around either vigorous movement or pretence. Notably, all teachers believed that teachers should stay out of children's play and were observed to do just that, other than to re-direct or, as in the case of Fran, where a child was perceived to need support in a play context. Teachers were much more likely to engage with children who were 'working' (e.g. tidying up) or 'making' with the intention of evaluating and extending their activity.

Do early childhood teachers really value children's play as a medium for learning or is the description of 'play as learning' simply formal rhetoric? Several teachers explicitly expressed reservations about the value of play. Teachers actions would certainly seem to convey to children that it is activities other than play that have importance to adults. While there is some distance between this interpretation and the analysis of Apple and King (1977) it is not difficult to see such behaviour as early socialisation for the experience of formal schooling, in which work and play are separated (Renwick, 1984). The comments made by these teachers about not 'intervening' or 'interrupting' children's play suggests they would offer a different explanation for their absence from children's play contexts. Their statements that children need to 'play out' their experiences without adult intervention and that children learn more from peer models than from adults are consistent with psychodynamic and social learning theories. However Smith and Shepard's (1988) study alerts us to the ways in which structural features influence belief and provides a warning against accepting one-directional accounts unquestioningly. It may be that when teacher attention is a scarce resource (e.g. when the teacher-child ratio is unfavourable) certain 'beliefs' have a particular attraction, allowing teachers to reconcile what is possible with what is desirable. Each of these alternatives warrants further investigation if teacher behaviour in relation to children's play is to be satisfactorily explained.

### Teachers' 'Operational Theories': A summary

The reported study was concerned with assessing the adequacy of the operational theories held by the six teachers who participated. By relating the accounts these teachers give of their beliefs to what they do in practice, several observations made:

1. All teachers in the study were able to offer some account of their beliefs, although their abilities to do so differed markedly. In the main, what teachers said was consistent with what they did. In particular, what teachers said they valued (e.g., teaching respect) was usually found to be the focus of much of their interaction.

2. In each teacher's account some statements of belief were explicitly linked to the teachers' life experiences beyond the centre context. These beliefs seemed highly influential in the practice of teachers, suggesting that they were both genuine and powerful. For example, Fran believed that you had to "know you were OK" to cope with adult life and her practice was focused on affirming children's activity, while Roxanne believed you had to "learn the rules" if you were to cope with school and set out to teach these at every opportunity. It is claimed here that such beliefs, emerging from teachers' reflections on personal experiences, form part of teachers' intuitive knowledge and as such have a different status from their statements of formal knowledge.

3. Some accounts had less to to do with teachers' educational beliefs and more to do with their perceptions of contextual features such as the status of childcare work, the availability of trained staff, and the expectations of people in authority. In this study, these perceptions are viewed as another kind of belief which informs practice (while in other reported studies they are described as 'constraints'). It is possible that beliefs of this nature may be masked by apparent educational 'beliefs'. For example, while initially teachers described mat time as 'promoting children's learning', when questioned further they indicated their skepticism about this claim but justified the practice by commenting that it generated parent approval.

4. Sometimes teachers' statements of belief were not consistent with their observed practice. Several possible explanations seem likely:

   a) The statement is not one of genuine belief but rather reflects the teacher's view of what the questioner wants to hear. (It is noted here that assessing the 'genuineness' of someone's belief is problematic.) In the context of this study, statements of belief which were not manifest in a person's practice were not seen to be part of a person's theory.

   b) The statement of belief is an assertion of a 'proposition' which the teacher entertains. It is a statement of someone else's belief, perhaps existing as formal theory, which the teacher accepts at the propositional level. Statements of this kind often emerge as slogans, e.g. 'play is the child's work'. The teacher does not disbelieve these statements, and to that extent at least we might say she believes them. Actually they exist as untested 'propositions'. Often such statements relate to aspects of practice over which teachers see themselves having little control, e.g. the structure of the programme. It has been argued that these often reflect a person's formal rather than intuitive knowledge. To the extent that they inform practice, they constitute part of a teacher's theory.

c) The statement of belief is genuine but this belief is overridden or modified by another stronger belief. Thus Fran, in spite of believing that adults should not become involved in children's play, did become involved with Nell in order to provide the affirmation that she felt Nell needed. When teachers recognised their conflicting beliefs they reported experiencing 'dilemmas' in relation to their practice (e.g. Mary acknowledged her conflict between wanting to 'teach' as well as wanting to 'let children develop'). It is of interest to note that Mary, the teacher who gave the fullest account of her operational theory was still wrestling with its contradictory aspects. Her attempts to reconcile these involved her in testing various ideas out in practice and reflecting on the outcomes. There was a sense in which this process would never be finished, but was part of her ongoing praxis.

Often, however, teachers were unaware of contradictions between their statements or between what they said and did. For example, Roxanne was observed to act both as authority figure and conspirator, while Amber claimed that she aimed to promote children's independence, yet was observed to maintain their dependency by continually initiating interactions focused on assisting children (who were capable of independence). It seems likely that in these cases the teachers' declared beliefs were not genuine, or that these had only the status of 'propositions' which were entertained. Or, in the case of Amber it may have been that her beliefs were genuine but her theory didn't 'work'; that is, while she genuinely believed that her interactions promoted independence, the empirical evidence proved this to be a false belief.

5. Some teachers were unable to explain why they acted as they did. This may have reflected the limits of the methods used to elicit their views. However in some cases it seemed also to mean that their practice was relatively untheorised. Many teachers in this study indicated that the interview process prompted reflection for the first time. Some teachers, however (e.g. Amber, Roxanne) saw no need for reflection and were happy to allow practice to remain unexplained. This appeared linked to their view of practice as largely outside their control, but rather part of a structure determined by someone else (e.g., 'The Department of Education'; 'The schools').

## CONCLUSION

It was claimed at the beginning of this paper that teachers will only be optimally effective in achieving their educational goals when they are able to offer full and coherent accounts of their work and the theory which underpins it.

In light of this claim, the following suggestions are made regarding teacher education.

1. Practical problems should provide the starting place for dialogue between teacher educators and teachers. This may be effected through the juxtapositioning of teaching practice with classroom discussion, allowing teachers to identify real dilemmas, explore these collectively, and return to test theory, seeking resolution in practice.

2. The nature of the practical problems identified by teachers is likely to change as they gain more experience. This suggests that planned opportunities for teacher education should be career long.

3. Teacher educators should engage with teachers' existing beliefs. This would require shared reflection in an atmosphere of trust in which teachers are assisted to make these beliefs explicit, identify contradictions and ultimately submit belief to practical tests.

4. Formal or academic theories should be presented to teachers as resources available to assist them in the resolution of practical problems. The focus should be on developing 'operational theories' which inform their practices. In this way theory becomes demystified and all knowledge becomes problematic, the subject of critical self-reflection.

5. Beginning teachers' understandings of formal theory should not be assumed on the basis of their responses, removed from the practical context. Formal knowledge may come to have the status only of discourse, rather than actually informing practice. Assessment will need to involve observation of practice as well as beginning teachers' accounts of their practice.

6. Time should be set aside in teacher education programmes to allow for teachers' critical self-reflection, observation, processing and testing of theory.

7. The possibility that a hidden curriculum operates within teacher education programmes should be investigated, to ensure that teachers come to view teacher as a form of praxis rather than merely 'following rules'. Such investigation would require teacher educators to transform their own practice into praxis.

At this time, when the discourse of accountability prevails, it is necessary for teachers to be not only effective educators but also articulate advocates for their work with young children and their families.

Teacher educators best support this process by becoming partners with teachers in dialogue which serves to inform and transform practice.

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# PREPARING EARLY CHILDHOOD TEACHERS FOR A CAREER PATH.

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## Introduction

People who work with young children are drawn together as we are at this convention because they have so much in common. The children themselves create that commomnality, simply by being what they are, young children. However aside from that shared interest, adult roles, experiences, qualifications and expectations of a career path are enormously diverse and extremely vulnerable to ideological shifts in perspective and changes in political and economic circumstance.

The school, the schoolteacher and the process of schooling are all sufficiently established to maintain some degree of stability and immunity from legislative whims. The complex area of early childhood education, including all forms of regulated out-of-home group care, does not present such relatively simple ideas or agreed purposes. The question of career paths for teachers in primary and secondary education has a clearly defined reference framework of promotion, seniority, and salary scales which, however imperfect, at least are in place. Such in not always the case for the early childhood teacher. Industrial awards in New South Wales now have salary scales which take into account years of training and years of experience, however problems still exist in terms of how to value and acknowledge a significant increase in professional expertise which might be dealt with elsewhere by promotion or diversification. Perhaps we just have to say that this is the nature of the field. Typically a young teacher may have a great deal of responsibility early in her career. Then, having reached an end point, might choose to move into advisory or co-ordinating roles. In recent years however, many of these roles have been abolished in funding cuts in NSW. Not only has this reduced career opportunities, but in reducing support to teachers and directors has made it more likely that they will choose to leave the field altogether as their job satisfaction dwindles.

Any discussion of career paths for early childhood teachers therefore has to acknowledge the complexity of issues involved, without getting too distracted by the apparently insoluble problems along the way. Graduates from a three or four year University based professional training program, might reasonably expect to have a career which offers increase of responsibility, salary, status and valuing of further professional development. With further post-graduate education available, they might reasonably expect to assume leadership roles and address some of the entrenched problems of the workplace. Currently, there is a very high staff turnover rate in the field. Of a cohort of graduates one would be lucky to find ten per cent still working in the position for which they had trained after ten years. This is also the point where the salary scales allow for no further annual increment.There is a disturbing loss of expertise, continuity, and leadership.

No pre-service training program serves as an inoculation against all the circumstances of frutration and despair which lead to teachers walking away from the career they had begun with such enthusiasm. Training programs which exist separately from employing bodies have no direct control over working conditions or terms of employment. There are important advantages in having that autonomy, but additional responsibilities. The first is to do with the design of pre-service and in-service programs to cater for both extended and diversified career paths. The second responsibility is to listen to the voices from the field. The following " voices" come from the work of a fourth year B.Ed student, Anne Cipants, as part of an assignment investigating staff turnover in child care centres.

### Voice no 1. Pat.

Pat left her job as teacher/director at a 40 place community-based child care centre after six months, having had previous experience as teacher and director for six years. She had a three year Diploma of Teaching (Early Childhood).

Pat left to move on her career path to become a child care services coordinator for the local council. She admitted that she would probably have left soon anyway. She commented, "I felt burnt out, used up, put upon, I'd given my all." She was experiencing conflict with the committee. After an initial period of smooth running, some new committee members were wanting to tell her what to do in areas of the program which were her responsibility. Pat also experienced some difficulties with staff, whose home lives and working conditions affected morale, but " the more staff were given, the more they expected." Pat believed in team work, but felt that whereas her perception of this was using each person's skills for the best, the staff believed that everyone should do the same things.Greater support from her employer might have encouraged Pat to stay. She would also have welcomed in-service training in management skills.

### Voice no.2. Joanna.

Joanna had worked for three years in England with NNEB qualifications, then studied part-time for her Diploma of Teaching (Early Childhood). After seventeen years she left the 40 place child care centre that she had helped to set up, for a smaller pre-school. Initially Joanna gave her reasons for leaving the centre as family commitments, but subsequently it appeared that there had been a distressing disagreement with committee members over what she considered to be unethical and wrongful financial management. She had no peer or professional support network and felt very alone. Joanna had found that her teaching studies gave her enthusiasm for change in the centre and she found it frustrating to have to work with staff to bring this about when they did not have " the same insight through the same training."

### Voice no.3. Rita.

Rita had a Diploma of Teaching (Early Childhood). She had worked for six years as a pre-school teacher/director and was teacher/director for three years of a 50 place child care centre. She left this centre for a smaller pre-school. Rita described her decision to leave the centre as necessary to save her sanity. Her reasons were overwhelming frustration in bringing about changes in the centre, exacerbated by the absence of "professional colleagues" and support. Rita was studying part-time for her B.Ed. and was aware of changes that were needed. Staff were from different backgrounds and had different viewpoints. Rita saw the need for staff development, but this was not recognised or accepted by the staff. There were limited opportunities for appropriate and accessible in-service courses although some funds were budgeted for this purpose. In her new job, Rita found common goals and professionalism among the staff, and her employer provided support services and in-service opportunities.

There are many familiar elements here in these stories, but in terms of career paths, desperate escapes from blind alleys, rather than progression. There are some clear signals about job satisfaction, in particular its link with professional recognition. Well-qualified workers lend status to the whole field, under-valuing, perhaps through ignorance or suspicion, leads to the lowering of confidence eventually of everyone involved. Where there are so many pressures on early childhood services, it is vital to maintain that confidence.

The role of training institutes, in considering this situation, is an indirect one. What we can provide through pre-service and in-service programs is still very dependent on the energy of individual teachers to bring about change in the workplace. There are two concerns that we are addressing in the current review of our programs that are particularly relevant here, namely, access to teacher education programs and the role of post-graduate programs in providing leadership in the field.

### Pre-service teacher education.

The Institute is now part of a university and university rules of entry apply. However, recognition and credit for other courses is available, so that access is certainly available to students other than the school-leaver with the right score card. The specialised focus of the Institute, however, requires that teachers with primary or secondary qualifications still need to undertake approximately two years further full-time study in order to graduate with a three-year early childhood degree. A fourth year of study leads to a B.Ed and an Honours track will be available in 1993.

All our programs are currently being reviewed in close consultation with the field. The need for increased pre-service preparation in management and interpersonal skills is very much in focus as is the need for substantial study of child development, this being the basis for agreed goals. Understanding family and community functioning helps to place early childhood services in context. There is always a problem about how much can go into a pre-service program and how much is more relevant after a little experience.

## In-service education.

Rapid expansion of continuing education, distance education which allows for all our undergaduate courses to be taken externally, and the offering of selected post-graduate courses in intensive blocks are all ways of meeting the needs of teachers in the field. Some will be looking for professional support and development, some need to up-grade their qualifications, and some have a special interest they want to pursue. This is an area that we can predict will expand.

## Post-graduate programs.

In addition to our existing M.A. Honours prgram, we will have a wide range of Masters' level coursework available in 1993. There will be the opportunity to put together units on language and literacy, creative and performing arts, early childhood education, and early intervention. While admission the the Masters' program requires a four year first degree, some sub-sets of these units will be available as Graduate Diploma courses for those people with three year qualifications.

Given the history of Early Childhood Teacher Education in NSW, it seems unlikely that we will move away from pre-service undergraduate degrees as the dominant model. However, we do look forward to an increasing number of students at the post-graduate level, contributing in this way not only to the professional strength of the field, but also to research and innovation within the University.

## Career paths in Early Intervention.

For some years now we have offered a post-graduate diploma course in early childhood special education and early intervention. While that has been open to graduates from other professional training programs, we have judged it to be particularly successful with those people who have an early childhood background. Graduates are now working for the Education Department in Early Childhood Support Units, for the Health Department in Early Intervention Services, and for services run by agencies and community funding bodies as centre-based and family-focussed programs.

In a recent survey undertaken by the Early Intervention Association in NSW on carreer paths and professional development, respondents commented on the limited opportunities, lack of funding security, the choice of promotion involving more administration and less direct service, but considerable optimism about the prospects in a relatively new field. 71% of the respondents received paid leave to attend in-service courses and conferences, which seems to suggest substantial endorsement of professional development and status.

## Summary.

It is possible to plan a career path as an early childhood educator, although none of the tracks seem particularly clear. One of the underlying difficulties seems to be community ambivalence about what kind of people are needed to care for and educate young children. While this uncertainty remains we can predict that well-qualified teachers will choose to work in situations where their qualifications are valued and their professional status recognised. One way of supporting this is through in-service and continuing education. Training programs need to adapt to the needs in the field, but also support the development of leadership roles by providing post-graduate programs. The extension of professional roles in other areas, particularly that of Early Interventio, also offers possibilities for the development of a career path.

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# THE DEVELOPMENT OF AN INTEGRATED EARLY CHILDHOOD TRAINING PROGRAMME

Paper presented to the Early Childhood Convention, Dunedin 1991

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During the term of the Labour Government 1984-90 there were major changes in early childhood training in Teachers Colleges. The Government had an agenda to improve the quality and funding of early childhood services and an even grander plan to restructure all educational administration. Restructuring early childhood training became an integral part of this process. This paper is a case study of this process at Hamilton Teacher's College where the integration of training for work in kindergartens and childcare was only a small part of the development of an integrated approach to the early childhood curriculum and the training of students for early childhood programmes. This paper details the historical and political context of this policy; reflects on the theoretical frameworks which emerged to help structure the programme; and comments on the translation of these frameworks into practice as the first intake approach graduation. Hamilton Teachers College has now merged with the University of Waikato to form a School of Education with the old University Department of Education. This has meant a further appraisal of the early childhood programme which from 1992 will be part of a new B. Ed structure in which nearly all courses including teaching practice will be for degree credit. This total integration of early childhood training into a university degree framework has posed new challenges to the Centre whose staff have been determined to retain the integrated character of the early childhood training programme as well undertake opportunities for research, and for offering studies in early childhood to more people.

There are three sections in this paper:

Historical and political context
Developing a framework
Translating the framework into practice

## HISTORICAL AND POLITICAL CONTEXT

Early childhood training in New Zealand has, like early childhood services, developed in a 'topsy turvy' fashion (Keay 1980). The recurring pattern has been one of a perceived community need for a service, 'Do it Yourself' establishment (O'Rourke 1981), the realization of a need for training, and the eventual lobbying for funding from Government. The pattern has been similar for each service although the time sequence has varied from the slow beginnings of the kindergarten to the rapid emergence of nga Kohanga Reo (May Cook 1985). Each early childhood service and its training scheme has operated in a voluntary - Government partnership although, again, the degree of support and involvement by Government has varied considerably. Until the *Before Five* (NZ Government 1988) policies, the priority of respective Governments' was to support organisations which provided half day educational experiences for children rather than full day care. The pattern too, had been one of new community needs leading to the establishment of new services and new training schemes, rather than attempts to adapt existing services. This had led to a certain narrowness and rigidity in the different services with limited possibilities for working across the boundaries.

In 1984 the new Labour Government came to power with a political commitment to improve the quality and funding of early childhood services and saw improved support of early childhood training as an integral part of this. Early childhood educationalists were fortunate to have as Minister of Education, Russell Marshall who, prior to taking office, had informed himself well about the diversity and difficulties facing early childhood; who did not need an 'education' on the value of early childhood education; and did not have a mindset that early childhood education was only to do with sessional services. As part of the Labour Party policy on women, there was a commitment to bring childcare 'out of the cold' where it had been lingering in the Department of Social Welfare, and into the Department of Education. This happened in 1986.

A rationalisation of training began next, which in the first instance was to involve training that led to employment in kindergartens and childcare, the latter being an amorphous group of services defined in regulation as everything that was not a free kindergarten or a playcentre. Training for kindergartens had been totally funded by Governments in Teachers Colleges since 1972. While there were some quality people and quality courses, the Colleges were driven and structured around the needs of training for primary schools. Their training focus was exclusively on the kindergarten with a philosophy of sessional early childhood for the narrow age range of 3-4 year olds. The political quest for kindergarteners in the 1980's, however, was not for any real change in their current programmes nor for any integration with childcare, but was for three year training. They recognised the insufficiencies of two year training and were seeking parity with the primary school training.

By contrast, training for working in childcare was receiving only minimal support from Government (May Cook 1985). Through the energies of Sonja Davies a one year childcare course had been established at the Wellington Polytechnic in 1975 and the New Zealand Childcare Association established field based training for childcare workers in employment, which until 1983 was funded from grants from the Lottery Board. As a first step to do something about childcare training the 1984 Labour Government directed all the Teachers College except from Hamilton to run one year courses for childcare workers. This exception was probably fortunate for Hamilton because later when the new three year integrated training began it was easier to begin afresh. One year childcare courses were, however, unsatisfactory particularly with the broader age range and curriculum required in full day programmes compared to sessional kindergarten programmes. The difference in length also reinforced the unrealistic and outdated distinctions and prejudices between care and education in early childhood.

During the first Labour Government term 1984-7 the politics to improve childcare and kindergarten training proceeded separately. A first move was to establish the Working Party on Three Year Kindergarten Training whose Report was complete by April 1986.[1] In the meantime a Working Party on Childcare Training was established whose Report published in December 1986 went much further, and made recommendations intended to break down the separate tracks of early childhood training, by recommending three year integrated training programmes for both childcare and kindergarten in the Teachers Colleges A second recommendation was to incorporate the field based training programmes into this framework so that the Colleges would deliver integrated training in both preservice and field based options. For childcare people the recommendations were welcomed as another tangible sign of moves towards equitable funding and support for all services. There was more reluctance from the kindergartens who would gain their quest for three year training but lose the specialised kindergarten training which their Associations still had close links to. These Reports were also important because they both set out the broad parameters for the content of early childhood training and proposed a number of integral themes which all programmes should address. In the course of the 'political swings and roundabouts' the recommendation for three year integrated preservice training in the Colleges became policy and won funding[2] despite Treasury resistance to the idea. The second recommendation on the integration of field based training into the Colleges missed out despite the establishment of a further Working Party on Field Based Training (Department of Education 1988).[3] By then the second term of the Labour Government had begun. There was a new Minister and a new focus on the reform of the whole education administration.

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[1] Margaret Carr was a member of this working party as a KTA representative.

[2] Part of this funding package was money for specialist facilities in Colleges which would include hygiene and cooking facilities, childrens' play areas and teaching space.

[3] Helen May was a member of this working party in her role as Convener of Training for the New Zealand Childcare Association.

Colleges began their planning in mid 1987 with two Colleges each year beginning the new integrated programmes. The Department of Education briefed the Colleges on the new directions and broader focus the new training should have:

> We want to train people to work with children within the family. We are going beyond a centre based focus and into the context of family and culture. We are partners with other significant adults in the child's life as well as partners with other professionals. Therefore training must be conscious of the role all these people play.....We want to train the sort of person who will use training as a springboard to many diverse situations. We are also looking to ways of encompassing a wider range of people.[4]

Hamilton Teachers College was fortunate to have until 1989 as a lead in. We also had a small staff who brought perspectives from both childcare and kindergarten and who had no personal commitment or investment in the old kindergarten programme. It was very easy to begin afresh, and to begin the process as a philosophical journey to define the nature of the early childhood curriculum.

Alongside this process which is detailed in the next section, new political initiatives for early childhood (ie) *Education to be More* (1988) and *Before Five* (1988) were being developed which would rationalise the funding and administration of all early childhood services and lead to further integration between services Thus, the integration of pre service early childhood training was just a small part in a major restructuring aimed at more equitable resourcing of early childhood in New Zealand. In 1990 the contents and standards of three year integrated training were defined as the future benchmark for all training in terms of the recognition for chartering and licensing. This was not to say that other organisations could not deliver training that was specialised for a particular service, but rather that all training schemes would count for so many points towards the benchmark and that courses could be done from a variety of institutions that would lead towards equivalency with the benchmark.

The four years since the introduction of the new training policy has been a time of major changes, not only in early childhood education but also, in the Government management of education. This has created a plethora of new government agencies. The tertiary institutions have also undergone changes though the *Learning for Life* (1989) reforms. In the case of Hamilton Teachers College this lead to a merger with the University of Waikato Education Department in 1991 to form a new School of Education. This makes our early childhood training programme unique in New Zealand while posing many new challenges.

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[4] Verbatim quote from an address by Rosemary Renwick from the Department of Education on the new directions of integrated training. February 1988.

## DEVELOPING THE FRAMEWORK

The initial development of a theoretical framework for the programme came from three directions:

a. The essential components and integral themes as set out in the reports of the Working Party on Three Year Kindergarten Training (April, 1986) and the Working Party on Childcare Training (December 1986) : **The working party framework**

b. Discussions and working papers of the planning committee: **The planning committee framework**

c. Consultations with early childhood practitioners: **The practitioners framework**

### a. The working party framework

Both Working Party Reports set out a 'common core' for three year training, structured into four 'essential components': Education Studies
Early Childhood Curriculum
Liberal, Personal, or Selected Studies
Practical Experience

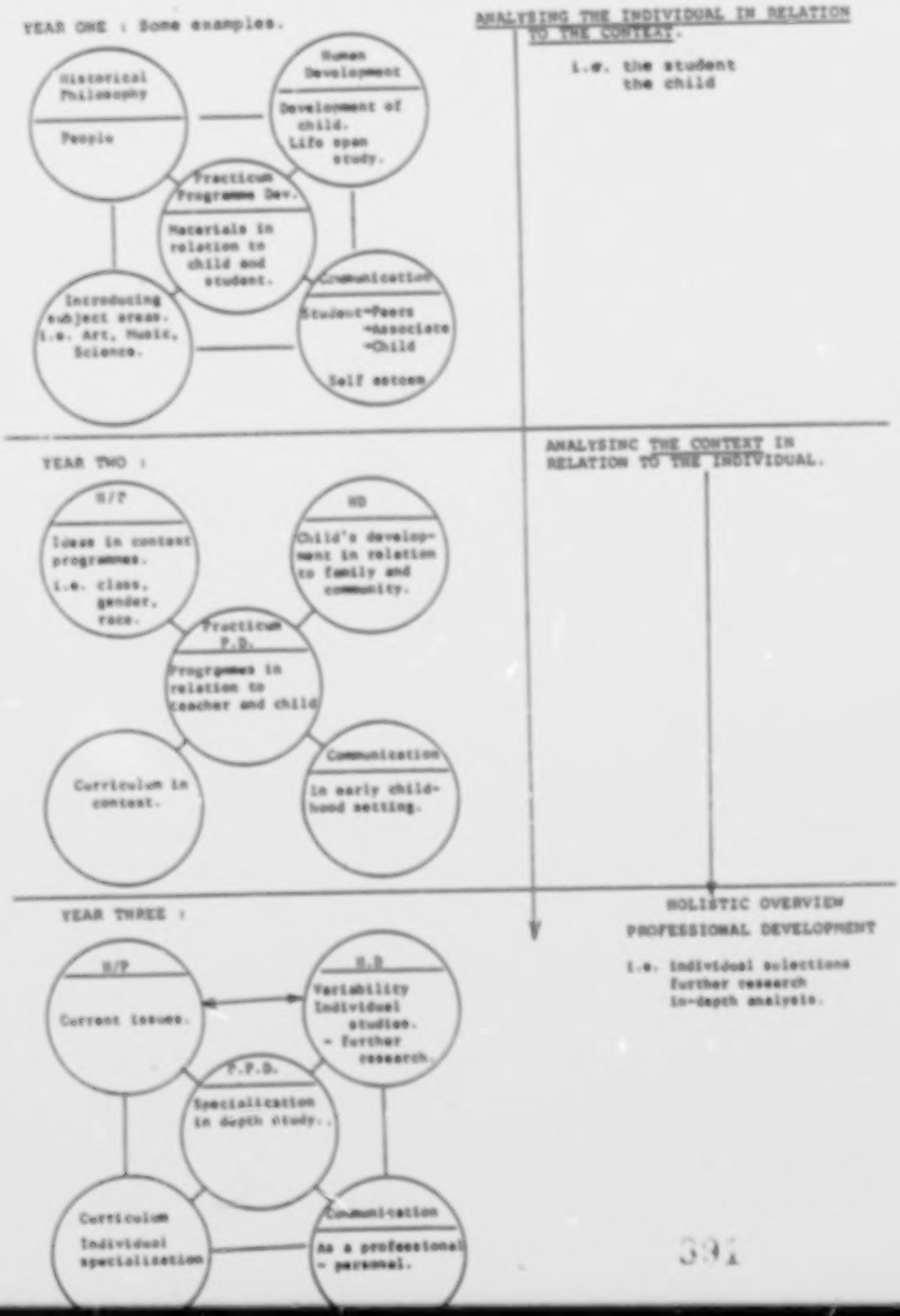
This structure was derived from the former two year Kindergarten Diploma, and the three year Primary training. In Hamilton it fitted too with the structure of the University of Waikato's B.Ed. degree, and we were keen that the new three year diploma would give early childhood students the same number and type of B.Ed credit as primary students (amounting to two thirds of a degree). However, very early in the discussions it became clear that the traditional division between Educational Studies and Curriculum did not match with our view of early childhood care and education. Specifically, in the new programme, we envisaged that within 'curriculum' courses, close links would be made with knowledge about child development and theories about how children learn. The idea of subject knowledge 'out there' waiting to be transmitted in appropriate ways is, increasingly, not seen as a useful model for primary teacher education; it has never been appropriate for early childhood. We wanted a 'learning caring and development' strand that integrated 'what' and 'how'.

The Working Party on Child Care Training Report included 'integral themes' across all of the essential components, and this was a structural feature that we did want to incorporate. The integral themes suggested in that document were:

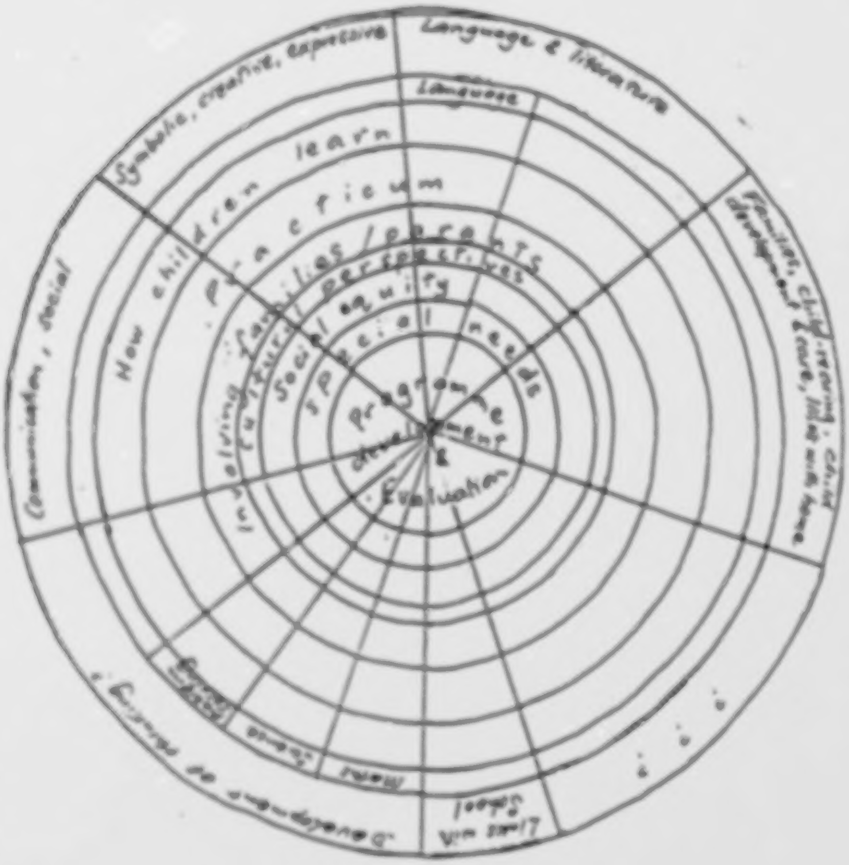
cultural diversity
individual needs
language studies
parents in education
personal growth

### b. The planning committee framework

We wrote read and discussed endlessly, during the latter months of 1987, as we tried to find a logical structure for early childhood care and education. We drew diagrams. Two of these diagrams became known as the CLOUDS model and the WEDGES AND RINGS model.


YEAR ONE : Some examples.
Historical Philosophy
People
Human Development
Development of child.
Life span study.
Practicum Programme Dev.
Materials in relation to child and student.
Introducing subject areas. i.e. Art, Music, Science.
Communication
Student–Peers –Associate –Child
Self esteem
ANALYSING THE INDIVIDUAL IN RELATION TO THE CONTEXT.
i.e. the student
the child
YEAR TWO :
H/P
Ideas in content programmes.
i.e. class, gender, race.
HD
Child's development in relation to family and community.
Practicum P.D.
Programmes in relation to teacher and child
Curriculum in context.
Communication
in early childhood setting.
ANALYSING THE CONTEXT IN RELATION TO THE INDIVIDUAL.
YEAR THREE :
H/P
Current issues.
H.D
Variability
Individual studies.
- further research.
P.P.D.
Specialization in depth study..
Curriculum
Individual specialisation
Communication
As a professional
- personal.
HOLISTIC OVERVIEW
PROFESSIONAL DEVELOPMENT
i.e. individual selections
further research
in-depth analysis.

The CLOUD model above looked at the progression over three years, from the context of **the individual student and child** in the first year, to the context of **family and community and centre** in the second year, to a holistic overview of **professional development** in the third year. (In the Learning Caring and Development strand a simple view of such a progression introduces Piaget, Erikson, and information processing theory in the first year, Bruner and Vygotsky in the second year, and Lilian Katz in the third!). The 'clouds' linked History/philosophy, Human development, Subject areas, Communication studies, and Practicum


Symbolic, creative, expressive
Language & literature
Language
Families, child rearing, child development & care, links with home
Communication, social
How children learn
Practicum
Involving families/parents
Cultural perspectives
Social equity
Special needs
Programme development & Evaluation
Science
Maths
Links with School

The WEDGES model looked at the Learning Caring and Development strand, incorporating integral themes. The wedges are **'curriculum areas'**; they cover an aim or objective for early childhood care and education (and spaces were left for additions: this was a model of integration not of curriculum). The rings are **integral themes**, in many cases they would also become courses in their own right as well. **Practicum** was part of this model, closely linked to courses.

**c. Practitioners framework**

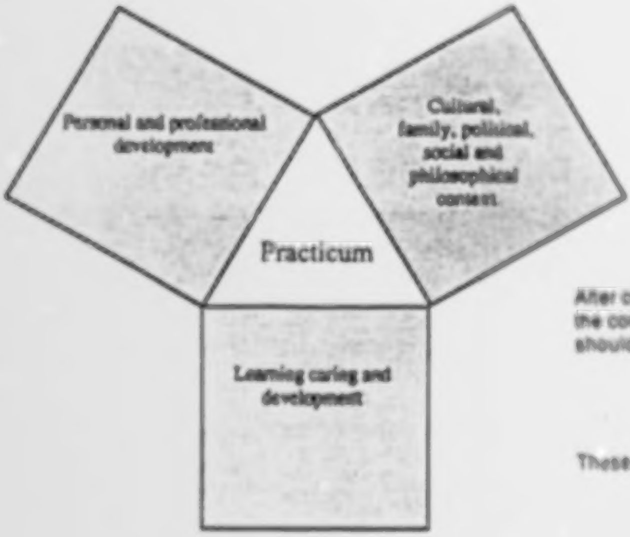
Teacher relief days were made available to the College in March 1988, and we invited practitioners in child care centres and kindergartens in Hamilton, Rotorua, and Tauranga to take part in a consultancy network for the new programme. 48 early childhood staff took part; we asked them two questions: 'What are the most important things that a good early childhood person does?' and 'What should we be doing in the training programme to prepare students in these areas?'. These were extremely useful sessions, and from the answers to the first question a general agreement on a framework with four strands emerged:

(i) *Working with children.* This included providing a stimulating environment and programme, developing and extending skills for life, providing an environment for play. An important sub-group of this, for the new programme, was health care and infant care. All groups emphasised the warmth of the environment as well as the physical environment; building children's self-esteem and being flexible were seen as important aims in this section.

(ii) *Communication.* This included working with parents and families, supporting two-way communication links, working within the community and with cultural differences, and with colleagues in shared decision-making.

(iii) *Professional leadership and growth.* This included knowing oneself, understanding the wider world of education and the politics of education., exploring ones own attitudes to biculturalism, sexism, violence, affirmative action. Knowledge about legislation, funding, salaries, administration, and the diversity of provisions for early childhood care and education, in an historical context, was seen as crucial to an understanding of the field.

(iv). *Personal growth.* Many consultants talked about the importance for being a good early childhood practitioner of having time for themselves and other interests.


Personal and professional development
Cultural, family, political, social and philosophical context
Practicum
Learning caring and development

After consultation with early childhood workers and teachers the consensus view was that a competent early childhood person should:

Be able to communicate effectively
Understand family and cultural issues
Have a theoretical and practical knowledge of children

These three criteria form the conceptual framework.

### d. The final framework

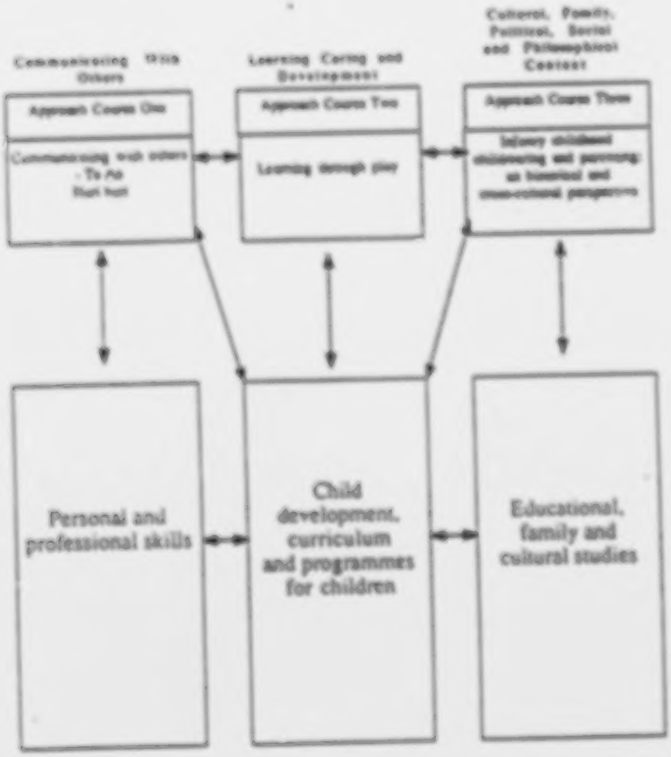
*(i) Strands*

In effect, it was the practitionrs' framework we adopted:

Communicating with others
Learning Caring and Development
Cultural, political, social, and historical contexts
Liberal Studies

Each of these strands begin with an 'Approach Course', a concept used at Pacific Oaks College of Education, Los Angeles. These courses introduce the main themes that will be developed over the three years: Communicating with others begins with Te Ao Hurihuri (the name of the College marae), Learning Caring and Development begins with Learning through Play, and the Cultural, political, social and historical contexts begins with Childrearing and Parenting.

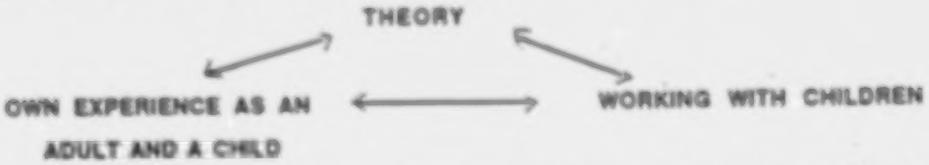
## APPROACH COURSES


Communicating With Others
Learning Caring and Development
Cultural, Family, Political, Social and Philosophical Context
Approach Course One
Approach Course Two
Approach Course Three
Communicating with others - Te Ao Huri huri
Learning through play
Infancy childhood childrearing and parenting: an historical and cross-cultural perspective
Personal and professional skills
Child development, curriculum and programmes for children
Educational, family and cultural studies

Each of the areas begins in year one with an approach course, that introduces the main themes that will be developed over the three years. Each approach course is also constructed to provide an opportunity for students to share their own experiences. Not only do the diversity of these experiences provide valuable teaching data, but they provide an opportunity for an early airing of different viewpoints.

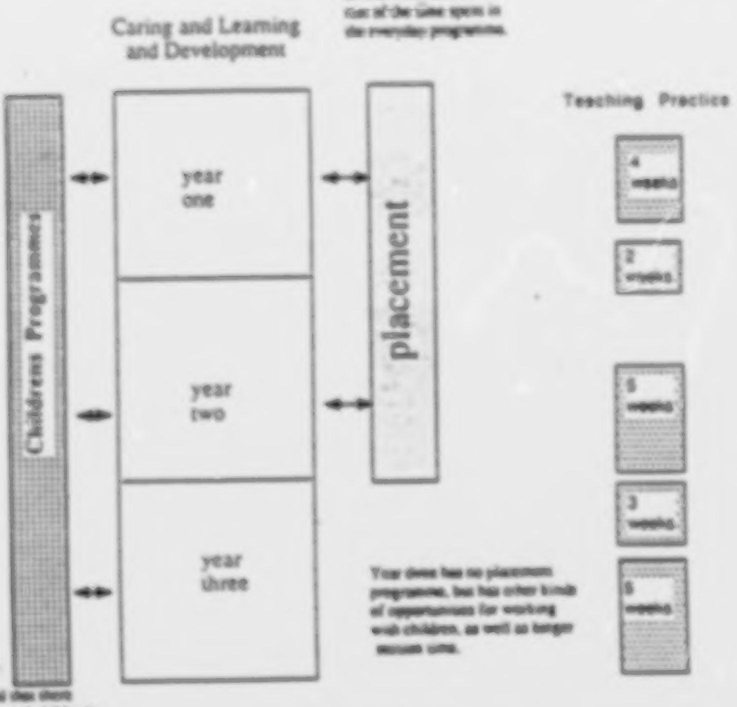
(ii) *Linking theory with practice*

The following triangle describes the ways in which theory is linked with practice


THEORY
OWN EXPERIENCE AS AN ADULT AND A CHILD
WORKING WITH CHILDREN

- Adults make sense of theory or construct theories from their own life experiences (Hunt, 1987). 'The student teacher is a learner who is actively constructing views of teaching and learning based on personal experiences and strongly shaped by perceptions held before entering the program' (Gunstone and Northfield, 1987) Therefore wherever possible courses provide opportunities for students to explore the views and intuitive theories they bring to the programme. Freire writes about the advantages of 'an active, dialogical, critical and criticism-stimulating method 'to offer the people the means by which they could supersede their magic or naive perception of reality by one that was predominantly critical..' (Freire, 1983: 281). We wanted to set up dialogues debates and discussions, in workshop and seminar situations.
- 'Curriculum' and theories and research about learning are linked within courses. 'The whole field of early childhood education at both the pre-school and beginning school phases must take much greater notice of contemporary research and resulting theory '(Ashby and Boulton-Lewis, 1985 p.29)
- Many courses link with a concurrent practicum placement programme, and have input into the block practicum programme .

This is 3-6 hours a
week in a kindergarten
or childcare centre.
Part of the time is doing
course work, and the
rest of the time spent in
the everyday programme.

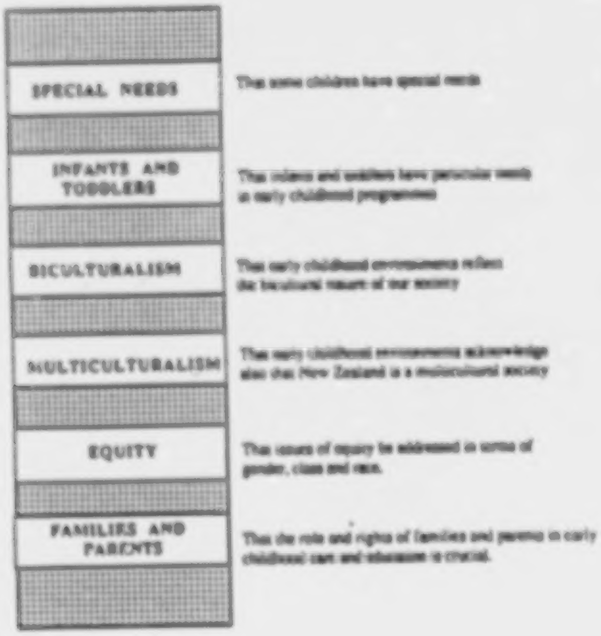

Caring and Learning and Development
Childrens Programmes
year one
year two
year three
placement
Teaching Practice
4 weeks
2 weeks
5 weeks
3 weeks
5 weeks

Year three has no placement
programme, but has other kinds
of opportunities for working
with children, as well as longer
session time.

It is hoped that there
will be several children's
programmes operating
at the College centre, to

(iii) *Integral themes*

All courses must address the following integral themes, and how this will be done is set out in each course outline. (We have later added 'links with school'):


SPECIAL NEEDS
That some children have special needs
INFANTS AND TODDLERS
That infants and toddlers have particular needs in early childhood programmes
BICULTURALISM
That early childhood environments reflect the bicultural nature of our society
MULTICULTURALISM
That early childhood environments acknowledge also that New Zealand is a multicultural society
EQUITY
That issues of equity be addressed in terms of gender, class and race.
FAMILIES AND PARENTS
That the role and rights of families and parents in early childhood care and education is crucial.

## e. Bicultural considerations

An important part of the theoretical framework was that the programme should be bicultural. In the first year's intake, 20 % of the students were Maori, several of them coming with considerable experience in nga Kohanga Reo. The then Hamilton Teachers College charter affirms a commitment to biculturalism and the Treaty of Waitangi. The bicultural aspects of the programme have developed slowly; at the outset the staff were pakeha, and high priority was therefore accorded to appointing Maori staff. In the first two years of the programme, each course was required to address bicultural considerations, all students were required at some time during their training to attend a one week Treaty of Waitangi course, and the Department of Maori Studies prepared Te Ao Hurihuri to parallel Childrearing and Parenting and Learning through Play, exploring the topics from a Maori perspective.

In 1990 those students who were bilingual were enabled to do their Practicum in nga Kohanga Reo. A number of Kaitiaki from kohanga in the Waikato region were willing to become Associates, and we had a Maori staff member who could liaise with the kohanga and visit the students. By September 1991 there are three Maori staff (out of a total of 11). At the request of the students, and in parallel with an initiative in the Primary programme, a whanau group has been established. This group of students have a Maori tutor, and remain together as a group for tutorials. The structure has been developed so that when we have a large enough group of students who are fluent in te reo Maori, they will be able to take many of their courses in te reo Maori, and concentrate on developing skills in te reo for their liberal studies, if they wish. The University of Waikato now offers courses taught entirely in Maori, and these courses will also provide our students with new options for their degree.

### e. Future theoretical considerations

Tom (1985) describes four teacher education paradigms in the U.S.: (a) behaviouristic, stressing observable competencies (b) personalistic, emphasising personal maturity (c) apprenticeship, emphasising tha accumulated wisdom of experienced practitioners; and (d) inquiry, stressing the issue of which educational goals should be given priority. Our programme currently contains examples of all four paradigms. As we enter a new stage in the development of Diploma and B.Ed, with more Diploma courses and Practicum becoming part of the B.Ed degree, at the same time as clearly defined achievements are required for benchmark qualification, continual debate discussion and dialogue will be necessary to clarify the philosophical direction of the Diploma. There may be a tension, for instance, between the aim of 'teaching student teachers to reflect' (Zeichner and Liston, 1987), and defining specific (behaviouristic) skills or competencies for working with infants and young children, identified in advance. We look forward to the challenge.

## TRANSLATING THE FRAMEWORK INTO PRACTICE

The programme for three year early childhood training that we have developed has firstly, an history and secondly, a framework underpinned by a strong theoretical base and a clear philosophy. Thirdly, it has been packaged in a variety of ways to maintain its integrity but also to fit the requirements of the institution/s in which it is being delivered.

### a. The packaging of the programme

The theoretical framework that finally emerged from deliberations and consultations was one that took into consideration the needs of early childhood training as perceived by the community and by those already working in a training programme within a training institution. The series of diagrammatic models proposed in the early discussions had to be refined. The stage was reached where decisions had to be made about the various programme components, how these were to be divided into courses, their timetabling and then how they could be adapted to meet the structures required both for a Diploma of Teaching and a Bachelor of Education.

The first step was to package the programme and its courses in a way that clearly identified the underlying framework, the four major strands of the programme and the approach courses introducing them. The philosophical view represented in the diagram below, however is different from the structure required by the University.

| | *Communicating With Others* | *Learning Caring and Development* | *Cultural, Social, Philosophical and Historical Context* | *Integration, Studies* |
|---|---|---|---|---|
| Year One | **Communicating With Others One**<br>Part A: Communicating With Others<br>Part B: Te Ao Hurihuri | **Learning Caring and Development One**<br>Part A: Learning Through Play<br>Part B: Moving and Growing<br>Part C: Health, Nutrition and Safety<br>Part D: Expressive Activities One | **Family and Cultural Studies One**<br>Childrearing and Parenting:<br>an historical and cross-cultural<br>perspective (B.ed)<br>**Education Studies One**<br>Part A: Lifespan: from birth to death (B.ed)<br>Part B: An Historical and Philosophical Introduction to ECCE (B.ed) | Forum<br>Options A<br>Options B |
| Year Two | **Communicating With Others Two**<br>Part C: Educational Media and Technology<br>Part D: Communication in Relationships | **Learning Caring and Development Two**<br>Part E: Making Sense of the World (B. ed)<br>Part F: Children's Language (B. ed)<br>Part G: Socialising with Others<br>Part H: Expressive Activities Two | **Family Studies Two**<br>Families and Parenting in New Zealand<br>**Cultural Studies Two**<br>Part A: Maori Studies<br>Part B: Biculturalism<br>**Education Studies Two**<br>Current Theories and Practices of ECCE (B.ed) | Forum<br>Options C<br>Options D |
| Year Three | **Communicating With Others Three**<br>Part E: Communicating Through Music<br>Part F: Moving into the Profession | **Learning Caring and Development Three**<br>Part I: Special Programmes for Young Children (B. ed)<br>Part J: Research Topic (B. ed)<br>Part K: Programme Development and Evaluation (B. ed) | **Family Studies Three**<br>A Partnership with Parents in ECCE<br>**Cultural Studies Three**<br>Multiculturalism<br>**Education Studies Three**<br>Issues in Education (B.ed) | Forum<br>Options E<br>Options F |

In order to "sell" the programme to the Education Department of the University of Waikato and, subsequently, to the Board of Education it required repackaging. It was necessary to show how the Early Childhood framework for Bachelor of Education credits, parallelled the framework in place for Primary trainees

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**B.Ed Degree Credits**
**Division E Programme**

| | 100 Level | 200 Level | 300 Level | |
|---|---|---|---|---|
| Education | 31161 Family and Culture<br>31162 Lifespan<br>31163 Hist/Philos of ECCE | 31261 Making Sense of the World<br>31262 Theories & Practices<br>31263 Issues in Education | | 9 |
| Curriculum | | 32231 Children's Language<br>32232 Special Programmes<br>32233 Research Topic<br>32234 Prog Dvpt & Evaln. | | 4 |
| Subject A | Paper 100/A<br>Paper 100/B | Paper 200/A<br>Paper 200/B | | 4 |
| Subject B | Paper 100/A | Paper 200/A<br>Paper 200/B | | 3 |

[ Plus 3 further papers in any subject, at any level ]

Fortunately, there was little pressure on us to mount, or participate in, identical courses for those in place for primary trainees. What was sought was an assurance from the university education curriculum committee that the disciplines of history, sociology, philosophy and psychology were being adequately addressed..There was no doubt in our minds that this would be the case. We were fortunate in having a staff with not only strong early childhood qualifications but also high academic qualifications with strong interests covering all the educational foundation disciplines.

With the amalgamation of Hamilton Teachers College and the University of Waikato in January 1991, the new School of Education undertook a review of the Bachelor of Education. Apart from papers in Professional Support all the papers students study for their Diploma of Education will count towards a Bachelor of Education. This "new" Bachelor of Education comprises 28 papers and a new strand of Professional Practice ensures practicum becomes a degree credit. Hence, only a few months into the first third year we have offered of our new three year early childhood programme, we were again faced with the challenge of evaluating and reviewing our programme, rationalising some aspects of it and repackaging it to meet new degree requirements.

The overriding aim as we looked at the new degree structure was a desire to maintain the integrity of the programme as a whole. Students are now to take papers in Educational Studies, Curriculum Studies, Liberal Studies, Professional Studies and Professional Support. A determination to ensure the survival of the underlying philosophy, and the original framework that had been developed and operationalised, meant that the degree regulations initially proposed, required adaptation for students training in early childhood; a situation also faced by people teaching in and responsible for the secondary training programmes. In early childhood, for example, we were unable to visualise and unwilling to acept a split between curriculum and practicum as proposed for primary programmes. A programme integrating curriculum and practice is something on which we place a high value.

With the regulations finally firmly in place package number three was developed

EARLY CHILDHOOD PROGRAMME: COURSES IN THE B.ED/DIPLOMA STRUCTURE

| Year 1 | Year 2 | Year 3 | Year 4 |
|---|---|---|---|
| EDUCATION STUDIES<br>Child Rearing &Parent.<br>Lifespan<br>Hist/Phil Intro. ECCE | EDUCATION STUDIES<br>Current Theories & P.<br>Making sense | EDUCATION STUDIES<br>Issues in Ed Pt2<br>Special Progs Pt3<br>Prog Dev & Eval& | EDUCATION STUDIES<br>xxx |
| CURRICULUM STUDIES<br>Cultural Studies I | CURRICULUM STUDIES<br>Cultural Studies II | CURRICULUM STUDIES<br>Creative Environ | CURRICULUM STUDIES<br>Research |
| LIBERAL STUDIES<br>Lib A<br>Lib A<br>Lib B<br>Lib B | Lib A/B<br>Lib A/B | | |
| PROFESS. STUDIES<br>Integrative Studies I | PROFESS STUDIES<br>Integr St II | PROFESS. STUDIES<br>Into the Prof | PROFESS STUDIES<br>Reflect. Practitioners |
| PROFESS. SUPPORT<br>Communication | PROFESS SUPPORT<br>Comm/Ed Media | PROFESS. SUPPORT<br>Partnership parents | PROFESS SUPPORT<br>Early School Years |
| OPTIONS | OPTIONS | OPTIONS<br>2 papers | OPTIONS<br>3 courses |

The courses are divided into the strands of the Degree and Diploma, namely, Education Studies, Curriculum Studies, Professional Practice, Liberal Studies and Professional Support. Students studying for a Diploma in Teaching in Early Childhood Care and Education will be able to major in Education and/or Liberal Studies in their degree. Some streamlining of courses has occurred.

To summarise then, the different packaging that we have resorted to has reflected the requirements of the institution in which we work. The diagrams presented in this section are what the university wants to see in terms of degree structure and requirements. In spite of these requirements we have maintained the integration of theory, curriculum and practice which is the reality of early childhood. The original intent of the programme is still apparent and our philosophical framework remains intact.

Philosophical framework for new B.ed programme beginning 1992

| Communication with others | Learning Caring and Development | The context of learning |
|---|---|---|
| Year one<br>communication | *Integrative Studies one,*<br>learning and growing<br>health and safety | *Cultural Studies one*<br>Treaty issues<br>Te Ao Hurihuri<br><br>*Education Studies one*<br>Childrearing and Parenting<br>History and Philosophy of ECCE<br>Lifespan |
| Year two | | |
| communication | *Integrative Studies two*<br>Making sense of the world<br>Children's language<br>Socialising with others | *Cultural Studies two*<br>Biculturalism<br>multiculturalism<br>Maori studies<br><br>*Education Studies two*<br>Current Theories and practices in ECCE |
| Year three | | |
| A Partnership with parents | *Integrative studies three*<br>Specialist programmes:<br>infants and toddlers<br>children with special needs<br>Programme development and evaluation<br>Moving into the profession<br>Creative environments | *Education Studies three*<br>Issues in Education |
| Year four | | |
| | Reflective practitioners<br>Research topic<br>The early school years | student choice |

In this strand all courses have a practical component working with children There is also a teaching practice course each year

### b. Different delivery modes

Designing a new programme, implementing it and adapting to suit a range of requirements has in a way only been the beginning. The excitement of seeing a new programme come into action has been stimulated a number of developments which require other innovations. One of these has been the teaching of the programme off-campus and another the introduction of a whanau group - both of these initiatives reflecting a strong concern for equity in terms of Maori people.

Requests for early childhood professional preparation programmes in rural areas have been numerous. In response to one of the strongest of these requests it was decided to initiate an off-campus part-time programme 200 kilometres away from the university at Turangi. In January 1991, the teaching of the programme part-time, off-campus became a reality. The women in the programme were selected by the selection committee using the same procedures as those used for on-campus students but incorporating comments from the local Maori community. The majority work in Te Kohanga Reo They attend classes on an average of one full day per week. Their study year is longer than that for on-campus students and during each year they are expected to attend at least one intensive course on- campus. The clientele for this programme bring with them a wide range of experiences and skills. It is, therefore, inappropriate to deliver a programme that is identical to that offered in the institution. Credit, for example, has been given for Maori Studies courses and other courses are constantly being adapted to suit both the delivery mode and the experiences of the women.

A second group in which a different mode of programme delivery is apparent is with the whanau group. There was growing recognition among the early childhood team that there was firstly, a need to provide a more supportive environment for Maori students entering the programme as well as encouraging greater use of the Maori language. Established in February 1991 in the on-campus programme, the Whanau Taonga of thirteen students is committed to developing students' understanding of Maori culture and fluency in Maori language. Ultimately, the aim of the group is to develop early childhood professionals who are bilingual.

### c. Moving into the future

A need to address the managerial structures and departmental structures of the new School of Education arose with the amalgamation of Hamilton Teachers College and the University of Waikato. Historically, Early Childhood staff have been attached to the Education Department of Hamilton Teachers College and have functioned as a semi-autonomous group within that department. The review of departmental and managerial structures, along with the changed degree structure,have afforded people teaching in the field of early childhood the opportunity to review their position and to develop a vision for the future. One issue that needed attending to was whether people would be willing to break into the various departments being established or whether they wished to maintain the coherence of the programme by keeping courses under the rubric of early childhood.

The opportunity to listen to the plans of those working in the field of education in general, and early childhood in particular, led to the proposal for a separate Department of Early Childhood Education. This Department of Early Childhood Education would eventually function in the same way as any other university department, developing its own major in early childhood education and having the dual function of teaching and research both at the undergraduate and postgraduate level. Two Masters papers directly relating to early childhood have already been accepted this year; one paper originating in the "old" Education University Department and the other from the Centre for Early Childhood.

A Department of Early Childhood Education would allow for two developments. Firstly, it would enable those students involved in the training programme to follow their interests through to Part III in their first degree, and then through to the postgraduate level, studying with lecturers with research interests in the field. The aim of this process would be to develop reflective, competent practitioners with strong academic and research skills. We are very aware of the dearth of postgraduate early childhood personnel and researchers in New Zealand. Secondly, it would extend the clientele of those studying in the field of early childhood. Currently we have three courses available to all students within the university and we intend to continue in the future extending our offerings to this clientele group.

## Conclusion

The graduates of the new programme will, we believe, meet the goals of the programme. They are developing a personal philosophy of education, are building up their knowledge in the education disciplines, and are able to try out their ideas and skills in supportive learning environments. We have set high expectations in terms of their academic work and are now ensuring that these same high expectations are apparent in terms of practical achievements. These graduates of the programme will, be belive, be colleagues with whom we can reflect on practices together and consider the outcomes of some of these reflections. Coombe (1990, p.56) noted, "the expectations that society holds for those undertaking the care, nurturance and education of young children are...identified by a predictability which is comforting in its conformity but stifling of reflective change". The students completing this programme may well be the ones who will challenge these expectations and assume more responsibility for the direction of their profession. The final evaluation will come when we see how ably the graduates of this programme provide for the children and the families with whom they work.

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# A Comparison of the Employment Experiences of Childcare Workers in Non-profit and Privately-owned Childcare Centres: Some Preliminary Findings

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The issue of private ownership and operation of childcare centres has been a topic of intense debate in childcare circles from time to time. On the one hand, some have argued that the involvement of profit-making interests in the care and education of young children is totally inappropriate, whilst others, perhaps more pragmatically, argue that without privately-owned centres Aotearoa/New Zealand would have an even greater shortage of childcare facilities and that many private centres provide high-quality care.

The focus of this paper is on those who do, in fact, 'provide' that care: the childcare workers. This paper is a summary of the findings, to date, of a project being conducted to examine and compare the employment experiences of staff in a small number of non-profit childcare centres with those in an equal number of privately-owned centres in the Christchurch area. To what extent, and in what way, do their experiences as employees differ according to whether they work in a privately-owned centre, or a centre operated under some other management structure?

Some research has been carried out in the United States into this topic. The National Child Care Staffing Survey [1] provides the most comprehensive information to date concerning the characteristics of childcare workers in the United States, including comparisons according to the type of centre in which they were employed. Staff in non-profit and church centres were found to receive higher wages than staff in other types of centres; staff turnover rates were lower in non-profit centres and staff in non-profit centres received more benefits, experienced better working conditions and were more likely to have paid non-contact time, paid breaks and compensation for overtime. Staff in non-profit centres also viewed their work as a career and expressed greater job satisfaction and commitment to their jobs. Educational levels and levels of early childhood education and training were also higher amongst staff in non-profit centres and staff in non-profit centres were found to be more experienced than staff in for-profit centres.

In addition to attempting a similar comparison of New Zealand childcare workers, the present study gives some insight into the perceptions of New Zealand childcare workers generally, how they view their employment and career prospects, their levels of training, and their industrial conditions.

## The Context

At the time data was gathered for this project, there were 68 childcare centres in the wider Christchurch area. Of these, 22 were in private ownership (i.e. owned entirely by one individual, or two individuals in partnership, as a going business concern). Of the other 46 centres, these were either owned and/or managed by charitable trusts (ten centres), parent co-operatives (nine centres), an allied institution (e.g. a university; 11 centres) or they were operating as community creches, usually under the auspices of the City Council (16 centres).

The Supervisors of three non-profit centres were written to and asked to ask staff whether they would be prepared to respond, individually and in their own time, to a confidential written survey concerning their work experiences. All three centres agreed and staff duly completed the surveys. At the same time, the Supervisors of three further centres, all privately-owned, were approached with the same request. Staff at one of these centres immediately agreed to respond to the survey and subsequently did so; the others did not.

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[1] Whitebook, M. et. al. (1989). Who Cares? Child Care Teachers and the Quality of Care in America: Final Report of the national Child Care Staffing Study. (Oakland: Child Care Employee Project)

The circumstances under which the staff of the other two centres did not respond, those at another private centre which was approached, and the implications for staff at fourth centre which was not approached, became worthy of a study in themselves; a fifth private centre eventually agreed to complete the survey and did so. In total, the Supervisors of five privately-owned centres were approached and staff at two of these centres eventually responded with completed surveys.

Because the process of gaining access to staff in private centres, in addition to being very time-consuming, began to highlight dangers for staff as well as practical difficulties for the research, the decision was made to not approach staff at any more privately-owned centres. However, staff from some of the private centres involved made it known that they were eager to be interviewed in person about details of their working conditions and experiences; these interviews served to cast some light on to the possible reasons for the difficulty of gaining access to staff in private centres. (Unfortunately, at the time of preparation of this paper, not all of these interviews have been completed, so the information gained is not presented here.)

### Summary of Survey Responses

The written survey was in two parts. Firstly, it asked staff a number of questions concerning their qualifications, both general and in early childhood care and education, their work history, both in childcare and in other positions, and for details of their current working conditions. The second part asked for more subjective information, including their motivations for working in childcare, the most and least favoured aspects of their job, how they perceived differences between their current position and childcare positions they had held in other centres, how they perceived any problems they had experienced with their employer in their current centre or others they had worked in, and how they saw their future in childcare and the future of childcare in New Zealand generally.

In total, nine childcare workers from private centres and 23 workers from non-profit centres responded to the survey; every respondent was a woman. The age range of staff within the two types of centre was identical (18 to 57 years) but the average age of staff in non-profit centres was slightly higher (33.5 years, compared to 29 years in private centres).

One person surveyed from a private centre had no formal qualifications and three of the private centre workers surveyed had no formal qualifications related to early childhood. The proportions of untrained staff were approximately the same in non-profit centres but the spread of qualifications was wider, including two with university study, and there was a greater variety of early childhood qualifications within the group. A more dramatic contrast appeared when looking at experience in early childhood settings (including having raised one's own children) where workers in private centres had an average of three years experience, compared to an average of nine-and-a-half years experience amongst staff in non-profit centres.

A similar contrast appeared when comparing staff turnover between the two types of centre. The average length of time employed in the centre, when surveyed, was ten months in private centres, with the longest-serving employee having worked in the centre for one year and eight months; amongst the non-profit centres surveyed the average length of time employed in the centre was one year and eight months, with the longest-serving staff member having been in one centre for three years and six months. Each category included a centre which had opened within the last two years.

Three of the nine workers from private centres did not know under which award they were employed; in fact, one of the private centres was party to the National Award, the other to the Consenting Parties Award. Six of these workers believed they did not receive conditions above award entitlement, one thought that she did, and two didn't know. Five of the staff surveyed from non-profit centres didn't know which award they were employed under; the other 18 all knew their employers were party to the Consenting Parties Award. Ten of these workers believed they were receiving conditions above their entitlement under the award, three said they didn't receive any additional conditions, and ten didn't know.

Of staff who had been entitled to take leave during 1990, in private centres this ranged from none to 60 days (in one case of extended illness) with an average of 12 days off; in non-profit centres, the range was lower (none to 46 days) but the average greater, at 16.5 days. In the main, those staff who took leave for more than ten days in the year did so during their children's term holidays. Overall, very little leave was taken for personal illness.

A further contrast between the two types of centre was in rates of pay. Four workers in private centres did not know what their hourly rate of pay was, and of those who did, rates ranged from $8.70 to $12.50 per hour. Everyone surveyed from a non-profit centre knew their rate of pay, which ranged from $9.05 per hour (for a reliever) to $18.66 per hour. The average rate of pay in the private centres was $10.77; in the non-profit centres it was $11.75.

Of the 32 women who replied to the survey, 22 were in some form of on-going training. Only six of these were for basic qualifications and almost all of the remainder working towards equivalency with three-year training, chiefly by correspondence.

When asked what had attracted them to work in childcare, the response was, overwhelmingly, a love of children (17 of the staff surveyed in non-profit centres, and five of those from private centres).

> I decided that a job working with children would be a fulfilling and enlightening change. I have always enjoyed the interaction involved with children and the satisfaction received through watching children prosper and thrive.

The next most common reason was the desire to see good-quality childcare provided, although this was mentioned only by staff in non-profit centres.

> A genuine love of children and a desire to nurture them and encourage learning in a fun way. This work offered a challenge because I feel very strongly that there is a need for extremely high quality childcare.

Two of the workers in private centres didn't know what attracted them to the job. Other reasons for choosing to work in childcare included the desire for a job change, being able to take one's children to work, childcare being the only work available, wanting to work with other adults, self-development, career choice and the nature of the job (e.g. being able to spend some time outside). Only one person (from a non-profit centre) was attracted by the pay and job conditions.

The trend toward enjoying working with children was not as apparent, however, when employees were asked why they continued to work in childcare. Four staff of private centres said they enjoyed the children and four mentioned that they felt childcare was important and necessary; one enjoyed working with other adults and one mentioned that the pay and conditions were good. In non-profit centres half the staff mentioned enjoying the children but the next most important aspects (eight responses each) were the pay and conditions, and the enjoyment gained from working with other adults, including parents.

> Simply because I enjoy my job and love the children. The staff I work with are great and have become my best friends. My hourly rate of pay is good and my hours are great.

The next most important aspect (four responses) was that the job gave opportunities to gain qualifications and career advancement. Surprisingly, only one person mentioned the difficulty of finding another job as a reason for staying in childcare.

For staff in both types of centres, the rewards and reactions received from children were the most valued aspect of the job; this was mentioned by almost every worker. Second to this, and mentioned by about half, was the reward of being appreciated by other adults, especially parents.

> Being able to teach and care for the children. Watching them grow and learning, knowing you are part of it and help in some ways. Seeing them so happy!
>
> Happy children. Content and enthusiastic staff. Positive comments from parents and their pleasure in being assured that their children are having a great time.

When questioned about the least valued aspects of the job however, there appeared a much wider and more varied group of responses. Two workers in private centres mentioned that they found dealing with sick children brought to the centre to be particularly difficult. No other aspect received more than one comment from staff in the private centres, but included busy days, tensions between work and home, bad manners in children, the physical and emotional stresses, lack of time being untrained, the challenge of providing activities for the children and feeling uncomfortable about the centre being run as a "business". In non-profit centres sick, neglected or abused children was also named most commonly as the most difficult aspect (nine responses), followed by stress and illness, and lack of equipment or facilities. Several staff from one non-profit centre complained of the inadequacy of the staffroom. Some staff also mentioned friction over staff attitudes to childcare as a difficulty for them; the two following comments were made by staff in different centres, when asked about the most difficult aspects of their job:

> Older staff members who have been out of the workforce for some time [and] don't really believe in childcare (basically believe in mothers and preschoolers being at home). I don't know whether they realise it (it has been pointed out) but this reflects very strongly in their attitude to work and relationships with parents and children.
>
> Having to accept that these young children are at childcare and not at home with their parent.

Generally speaking, staff in both types of centre were now experiencing better pay and working conditions than in centres in which they had worked previously, although a large number of respondents had never worked in another centre so they were unable to comment. Other aspects which staff perceived as being improvements on previous job sites were, in particular, having more staff and the provision of better programmes for the children in their current centre.

When asked about problems they had experienced or were currently undergoing with their present employer, four of the nine workers in private centres had no problems to report. Of the others, problems such as lack of understanding of the work involved in childcare, unreasonable demands, favouritism in dealing with staff and implying guilt when sick leave was taken were mentioned. Overwhelmingly, of the 21 staff who replied to this question from non-profit centres, nineteen reported that they had no problems to report and several mentioned that any difficulties which arose were quickly resolved.[2]

Problems mentioned as having been encountered with previous employers were diverse. The majority of the staff who had worked elsewhere in childcare had at some time been employed in private centres. This group mentioned issues of intimidation, poor staffing, poor facilities, poor wages and conditions, non-unionisation, lack of communication and lack of recognition of qualifications as problems.

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[2] An interesting issue which arose out of this question was the apparent confusion amongst some staff as to the identity of the "employer" in the centre, with several staff referring directly to the supervisor as the employer. In non-profit centres in particular, the supervisor is frequently a member of the managing group and, because they are in constant contact with staff, they often carry out many of the day-to-day tasks of the employer, such as arranging for relievers. The difficulty for supervisors is, of course, that they are also an employee.

> [My pay is] much higher, as we are on the Consenting Parties. My other centre, the employer was a slave driver, my qualification was unrecognised by her, so I got paid $2.00 less an hour (even more I think) than I am on now. We also had very long hours of work, 7.30 - 4.30 or 8.45 - 5.45 (we had 1 hour for lunch though), which I found rather exhausting.
>
> Wouldn't pay me for statutory holidays over Christmas. Would leave me as an untrained childcare worker on $6.09 an hour in charge of the centre. I would not get spoken to for about a week if I had one day off sick.

Those who had worked previously in non-profit centres mentioned slightly different issues - poor management and co-ordination by committees, isolation from the employer, lack of communication and poor provision of equipment and facilities.

> Community organised creches run by constantly changing committees are a nightmare. I don't ever want to put myself through that again!

Staff were also asked to identify what they would change about their working conditions if they could. One of the nine employees of a private centre had no desired changes, whereas one-quarter of those in non-profit centres could not identify anything they would wish to change. In both private and non-profit centres the most desired changes were in equipment and facilities.

> Enlarge bathroom.
>
> A larger centre to cater for more children.
>
> More equipment.

For staff of private centres the next most desired changes were to industrial conditions, such as sick leave, whereas in non-profit centres workers next desired more staff, followed by more release time and better conditions. Staff of private centres also desired more recognition for their work, less stress and more impartiality on the part of the employer when dealing with staff.

> Have an hour for lunch, have my non-child contact time. Able to ask for time off without feeling it was going to throw everyone out of order. NO MORE FAVOURITISM!!!

Other factors mentioned by workers in non-profit centres were better communication amongst staff, less structure in the programme offered to the children and a more varied mix of staff ages and talents.

When asked about their future in childcare, staff of both types of centres were generally optimistic, although few saw themselves as staying in childcare for more than the next few years.

> Hopefully opening a childcare centre of my own. I do want to work in another centre before this. Hopefully I haven't completely done my back in before then.
>
> I intend being in childcare for quite a long time - although I hope I will be able to take a break and come back in case I "burn out".
>
> I would like to stay in childcare but I don't want to work long hours. I like finishing at 3 p.m. like I do now. I would maybe like to move onto something, eventually, that deals with the child's development and family more than at the moment. Maybe doing a part-time degree at University is on the cards.
>
> I enjoy working in childcare at the moment but I can't see me working with children forever.

When asked about how they saw the future of childcare in New Zealand however, the responses were overwhelmingly pessimistic.

> I think childcare will be more and more in demand and I feel good centres will have to charge higher fees to continue their standards especially if government funding is cut.
>
> We have come a long way in [the] last few years but [I] feel backward steps approaching.
>
> At the moment it is quite.....shaky. Hopefully they will get all the problems sorted out and the government will come out of the Dark Ages and see what is going on and what is needed.
>
> I don't think it's going to be around very long which is a shame. There [will] be no money for funds, no subsidies.

One reply also expressed concern at the need for childcare:

> As an "old fashioned" person it horrified me to see the attitude today that it is every parent's right to expect someone else to do their childrearing for them. I would like to see them put their children first for a few years at least. I think parents should pay a lot more if they expect quality childcare.

Interestingly, despite differing trends in responses to several of the other questions, it was in these areas of predicting the future of childcare and their own employment paths in childcare that the responses of staff in private and non-profit centres showed the most similarity.

Summary
The results presented here are only a partial summary of the research to date; much valuable information from personal interviews will be included in the final report.

Despite this, it is apparent that similar trends to those found in the United States are appearing, even amongst a relatively small sample of New Zealand childcare workers. Workers in non-profit centres are better paid, overall they have better job satisfaction and enjoy better conditions of service, they are more experienced in working with young children and non-profit centres have slower staff turnover.

Further contrasts arose when staff were asked questions about how they perceived the motivations behind their day-to-day work. While almost all staff mentioned a love of children as being a major motivating factor, staff in non-profit centres were more likely to mention the importance of childcare as a service and/or their training and career aspirations as an important factor, as well as pay and conditions and the enjoyment of regular contact with other adults.

Staff overall found having to deal with sick children brought to the centre and poor equipment and facilities to be the most difficult aspects of their work, followed by stress and personal illness; it was interesting to note, therefore, how little sick leave was taken last year by those answering the survey. Staff of non-profit centres appreciated having more staff as an improvement over previous centres in which they had worked and staff in both types of centres were now experiencing better pay and conditions than in the past (although this was to be expected with recent dramatic changes to award conditions in early childhood).

When asked about problems experienced in dealing with their employer, distinct differences began to appear between the two groups. For staff in non-profit centres problems tended to be material, such as lack of equipment and facilities, or structural, such as poor communication and turnover of management committee members. In private centres however, issues were much more personal, such as favouritism in dealing with staff, unreasonable demands, intimidation, lack of recognition of experience and qualifications and being made to feel guilty for taking leave. Overall, staff in non-profit centres were very happy with the relationship they had with their employer or found any problems quickly resolved. Staff of private centres were more likely to want better pay and industrial conditions, whereas staff in non-profit centres were more likely to want more time for preparation and planning, and additional staffing.

Staff in both types of centre were generally optimistic about their future in childcare, although only a minority saw themselves working in childcare long-term. In contrast to this optimism, concerns about the future of childcare generally were strong, and tended to be centred around the lack of clarity surrounding current government policy.

## Conclusion

No attempt has been made here to theorise about the reasons why distinctions should appear between the working conditions and perceptions of staff in private and non-profit centres. To attempt some explanation of why these differences might arise however, some general points can be made.

Firstly, in most privately-owned childcare centres, the owner is on-site during the working day, making the relationship between employer and employee a very personal one and one which exposes the employee to a certain amount of vulnerability. Secondly, for staff of non-profit centres, the identity of 'the employer' is frequently shielded from them by the role of the supervisor; in conducting these surveys, and the subsequent interviews, it has become very clear that the role of 'supervisor' in most private centres is substantially different to that of supervisor in non-profit centres.

A third factor, which would bear further research, in the whole area of how childcare workers view themselves in a 'professional' light. It appears from the survey results presented here that staff of non-profit centres may view themselves in a different light professionally compared to staff of private centres when contemplating the status and importance of their work.

A final factor is the extent to which the need for private centres to return a profit to the owner affects the industrial conditions under which staff are employed, a question which is not addressed directly by the results presented here. To call a childcare centre "non-profit" simply because it is community-based is a misnomer; even community-based centres need to at least break even financially, and there are undoubtedly private centre owners who are motivated primarily by the need for good-quality childcare, rather than primarily by the profit motive. What is of concern for this project however is the way in which the workers perceive the process of centre management, as it affects them, not only in their pay and industrial conditions, but in the more qualitative aspects of their role as employees. From the data already collated and presented here, it appears that there are important distinctions between being employed in private versus non-profit childcare centres.

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# INCREASING THE COMPETENCE OF STAFF DEALING WITH YOUNG CHILDREN

## Introduction

Due to many factors, the numbers of toddlers involved in preschool (day care) from an early age in Sweden is increasing year by year. Firstly, over 85% of mothers of young children work outside the home. Secondly, society has assumed a major responsibility for ensuring that out of home care is available for working or studying parents with children over 1 1/2 years of age. The number of toddlers in preschool today varies greatly in different local authorities due to parental attitudes and to the availability of day-care centres. There is higher proportion of preschools in big cities than in small communities in the countryside. The proportion of toddlers in preschool varies. For the whole country it is 29% for children up to 3 (Statistiska centralbyrån, 1990).

During the last 15 years we have had a trend in Sweden towards extended sibling groups, (1-7 years, sometimes extended to 12 years). Recently, the mixed age groups and extended sibling groups have decreased in popularity. Neither the children below three nor the six-year-olds are considered to have the best care in groups in which there is a very wide age range. Grouping according to age has again become the rule, especially for children below three and more than seven (Sundell & Johansson, 1991).

At the same time, while there are increasing numbers of toddlers in preschool, there is the problem of recruiting staff, especially for the youngest children. The reasons for this could be:
1) Working with toddlers can be physically more tiring than working with older children.
2) Education of preschool teachers focuses on older preschool children. The reason for neglecting knowledge about toddlers in education is not only the tradition, but also the fact that there is very little knowledge of and methods for the education of children below three.

Up to around 1975 only nursery nurses worked with toddlers in day care. At that time a government commission worked out new guidelines for the care and education of children below school age. A view of "edu-care" was presented, which means that not only care was important for toddlers, but also education. As a result of this view, preschool teachers were also employed to work with these young children. However, it is still considered to be of higher status to work with children over three in preschool!

The results presented in this paper are described in more detail elsewhere (Palmérus, Pramling, Lindahl, 1991).

## Effects on young children in day care

From our review of recent child development research, we now know how competent a newborn child is in many respects (Osofsky, 1989). Today we think that, from birth infants have the capacity to experience the world around them, as well as the capacity to adapt to the environment (Hundeide, 1989). But in order to develop, the child requires not only fulfilment of its biological needs, but also an adult who shows continuity, sensitivity and responsiveness towards it .

Studies on the effects of day care on child development often present contradictory results. Some report that children in day care are more aggressive than those cared for at home, while other studies have not found any differences (Belsky, 1989). Positive effects reported by American researchers are that day-care children often show better social skills, have a clearer notion of gender differences, are better skilled at developing role play, are more willing to co-operate and are better able to handle separation. Reported negative effects are increased aggressiveness and disobedience. Children in day care more than 20 hours/week more frequently had an insecure attachment to their mothers, which could later increase psychological problems (Farquhar, 1990).

One of the few longitudinal studies carried out in Sweden about effects of day care shows that the children who began at day care before the age of 1 year were the ones who became the best learners in primary school (Andersson, 1988).

Whether day care is good or bad for children is a question which will never fully be answered empirically. The effects of attending preschool already as a toddler will always depend on children's individual needs, but we believe that in order to fulfil these needs one of the most important aspects is the competence of the staff.

## Aims

The aim of this research project is to increase the psychological and educational knowledge of the staff and to develop both content and methods appropriate for toddlers in day care settings. Our broad goal is to increase day care staff's awareness of young children's development and needs, as well as their awareness of their own behaviour.

## Subjects and settings

Each of the three centres is situated in a suburb of Göteborg. The population mainly consists of workers and immigrants, most of whom live in big blocks of flats. The proportion of persons living on social welfare is comparably high. Two of the child groups, A and V, belong to larger day-care centres with 3 or 4 more groups, the third group, J, is on its own on the ground floor of a block of flats.

In A there are two preschool teachers and two nursery nurses in a group of 14 children between 1 and 4 years of age. In V, four nursery nurses take care of 14 children aged between one and three. In J, 16 children aged between 1 and 3 are taken care of by two preschool teachers and three nursery nurses. The work in groups A and V was already well organised when the project began. Group J started up at the same time as the project.

The preschool functions between 6.15 am and 6 pm. There are activity periods of 1 or 1 1/2 hours in the mornings and the afternoons. Most children take a nap after the main meal in the middle of the day. Most of the staff have been working in child care for more than five years. Only three had worked for less than two years when the project started.

### Methods

All the staff were interviewed individually at the beginning and 19 months later, at the end of the project. The interview, which was carried out by the authors the first time and by an assistant the second time, dealt with the staff 's earlier experience of working with toddlers, their expectations of the project, their knowledge of child development, their tasks as care-givers and educators and attitudes to work.

As an introduction to the project, the staff attended a one-week education course full time. The course covered theories and knowledge concerning children's perceptual, cognitive, emotional and social development and information about the Swedish "Preschool programme" (Socialstyrelsen, 1987). Finally, the intervention programme "Mediated Learning Experiences" (MLE), developed by P. Klein (1989) in Israel, was introduced.

Every fourth week the interaction between children and every staff member was videorecorded and later analysed for all staff members in A, J and V respectively. The analysis was made in relation to the criteria of MLE and to the content and organisation visible in the video sequences. When the film was discussed with the staff, positive behaviour exhibited by staff was reinforced. We also discussed what could have been done differently and how to meet the child's "world" even better. This means that we sometimes focused on the adult's relation to an individual child and sometimes on a group of children. Both psychological and educational aspects were dealt with in the analysis.

### *"Mediated Learning Experience"*

According to Klein (1989), working with "mediated learning experience" helps the child to become both more intelligent and sensitive to the world around it. She believes that love, security and care are necessary but not sufficient conditions for a child to develop its intellectual capacity. Instead, one ought to influence the child's need system in such a way that the child will become interested in the world around him or her and willing to learn about people and things. Children do not learn specific skills or knowledge in the programme, but they are given experience which creates a flexibility in their thinking. Children are not expected to learn specific facts but to learn a positive way to learn.

Children obviously also learn by doing and observing, but MLE deals with the aspect of learning where there is an adult mediating between the child's experiences and the surrounding environment. The mediator can choose the focus and create a frame of reference by connecting children's experiences in time and space. According to Klein (op cit), learning may be more easily achieved if there is an adult who consciously teaches the child. The five criteria used are content- and context-independent, which means that the content focused on my the mediator is relevant to the environment and values specific to the society of which the children are a part. Through "mediated learning experience" children are given the opportunity to share the adult's experience and knowledge and benefit from them.

The intervention technique of MLE is based on five categories, which are to some extent hierarchical. Category 1 presupposes the use of category 2, which pre-supposes the use of category 3. Category 4 and 5 need the presupposition of category 1, at least. The five categories are:

### 1.Intentionality and reciprocity

An adult interacting with a child generally has a more or less conscious intention of what to mediate to the child. The mediation could be cultural, value-related or informative ways to conceptualize the world around us. The adults' intention must be based on an understanding of the child. It is of no value to try to mediate something to the child which the child does not focus on. There has to be a reciprocity between the child and the mediator. The adult can give the child opportunities to recognize the world around him/her, by increasing the child's awareness and focusing on phenomena in the surroundings. Here we would like to emphasise that it is our belief that the more the adult is able to catch the child's attention and then focus on that, the better possibilities there are for an intervention.

### 2.Meaning

The phenomenon the adult's and the child's attention is directed towards must then get to mean something to the child. The child must get a label, notion or word for what he or she sees, to be able to compare this particular experience with other earlier experiences. When verbalizing and giving objects meaning, the adult also mediates values and emotional expressions. The adult could be the one giving meaning, but she can also be the one who asks questions and lets the child give the meaning.

### 3.Transcendence

To transcend means to expand and to go beyond the "here and now" situation and mediate knowledge which "this" situation could be connected with. In this way the child will see that nothing happens in a vacuum, but that it can be related to earlier experiences. The adult could be active, telling the child about different objects, tasks or situations, but the role of the adult could also be to put questions to the child and get him or her to think, remember or reflect, see similarities, differences, properties etc. The younger the child is the more the adult must be the person who does the verbal reflecting, but also the one who answers questions. The most important thing is the reflective attitude she mediates.

### 4.Feelings of competence

In order to feel competent, one must first of all be approved of/encouraged, which can be done by eye contact, words, play, mimics etc. Praise is an important activity in this category. This does not mean praise in general but specific and immediate praise related to the child's action. The child must be able to relate the praise to the actual situation. This is one aspect of giving children a feeling of competence, but the other side is even more important - to explain and motivate the child's feeling of competence. If the praise is to mean anything to the child, he or she must understand the experience to be able to learn from it.

### 5.Regulation of behaviour

To help the child to regulate its behaviour means to lead the child verbally or behaviourally so that he or she can solve a task. This also means to think and plan in advance and to look for different alternatives when solving a problem. The adult not only helps the child by informing and recommending but also by questioning, stopping the child for a moment and pondering, giving clues to the child, or being a model. By regulating the speed and force of the child's action, the adult can help the child to plan its behaviour or regulate its impulsiveness. We see many similarities between this category and the Vygotskien notion of "scaffolding", in which the adult facilitates and teaches the child how to behave in different situations so as to utilise all the child's proximal zone of development (Linden, 1989).

**Results**

*Interview:*

From the pre and post interview results may be summarised in the following sentences.

Before the observation period the staff expressed:

- High expectations of the project, i.e. that they would become more fit to take care of toddlers.
- Care and routines are the main tasks of dealing with toddlers.
- 50% find it difficult to individualise.
- A wish to compensate for the stimulation and affection the toddlers cannot get at home.
- The main target is to get the toddlers to feel safe and to get along well in the day-care centre.
- To help the toddlers to form positive social relationships is more important than teaching them.
- Care is the most important task and if there is any time left, this can be used for education.

After the observation period the staff expressed:

- The observation and guidance period was a positive experience, which has given the staff a unified way of looking at toddlers.
- It is easier to cooperate between the staff members.
- Routine activities are used in a more stimulating way.
- Thanks to organising subgroups of toddlers, providing for individual characteristics was no longer a problem.
- Staff and parents fulfil different roles. Parents are more emotionally attached to the children. Staff stimulate the development of the children and interact according to prearranged schemes.
- Staff want to teach the toddlers and now have some knowledge of how to influence development in a positive way.
- Staff feel themselves to be mediating the development of the children and helping to open the eyes of the toddlers to their surroundings.
- The relationship between care and education is a result of how all the activities during the day have been carried out. Everything can be done in a pedagogical way.
- All staff members find themselves more aware of why they act in a special way. They also stress how they organise things differently in order to individualise and are able to meet the needs of the individual toddler more adequately. They find themselves more involved.
- All staff members express the usefulness of looking at themselves in videorecorded films, and how the possibility of reexperiencing the situations gives them a wider view of what has happened.

*Analysis of the videofilms*

The filmed sequences were coded according to the MLE criteria by an independent person. A note was made of each minute in which a certain category appeared on the film. The percentage of coded minutes in a sequence was calculated for each category. In the analysis the means for every staff member and every category were compared as well as the mean of the first third of the observations compared to the mean of the last third of the observations. Since some staff members had been absent on some occasions, a third could be two to four observations. The categories have been divided according to qualitative aspects, e.g. if the staff member or the child takes the initiative, if there is an explanation of the feeling of competence or regulation of behaviour. The meanings of the categories are:

* 1a Intentionality and reciprocity- the adult initiates or leads the interaction.
* 1t Intentionality or reciprocity- the toddler leads or initiates the interaction.
* 2n Meaning by naming
* 2q Meaning by questioning
* 3a Transcendence- adult telling
* 3r Transcendence - adult gets the toddler to reflect
* 4p Feeling of competence-praising the toddler
* 4e Feeling of competence- explaining, motivating the praise
* 5o Regulation of behaviour - ordering
* 5e Regulation of behaviour- explaining why

The table below presents a view of the pattern of the MLE categories, both for each member of staff and for the whole group.

Table 1. Means of MLE for the whole group (X) and for every staff member (J:, A:, V:), in proportion of observed time for all staff members and all categories. The staff are called J, A or V dependent on the centre they come from.

| s/c | X | J1 | J2 | J3 | J4 | J5 | A1 | A2 | A3 | A4 | V1 | V2 | V3 | V4 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1a | 80 | 78 | 81 | 84 | 76 | 56 | 71 | 82 | 81 | 82 | 88 | 87 | 93 | 83 |
| 1t | 33 | 35 | 51 | 38 | 37 | 24 | 38 | 33 | 38 | 34 | 33 | 25 | 18 | 23 |
| 2n | 86 | 90 | 94 | 89 | 87 | 54 | 82 | 81 | 88 | 84 | 94 | 92 | 95 | 88 |
| 2q | 65 | 63 | 57 | 57 | 51 | 48 | 61 | 67 | 67 | 72 | 76 | 81 | 67 | 76 |
| 3a | 32 | 38 | 40 | 18 | 30 | 5 | 18 | 22 | 28 | 35 | 51 | 45 | 45 | 36 |
| 3r | 16 | 18 | 25 | 9 | 10 | 0 | 11 | 10 | 13 | 13 | 22 | 26 | 28 | 25 |
| 4p | 5 | 4 | 2 | 5 | 0 | 1 | 7 | 5 | 5 | 8 | 8 | 4 | 7 | 5 |
| 4e | 14 | 7 | 7 | 18 | 9 | 8 | 6 | 12 | 6 | 16 | 17 | 17 | 12 | 13 |
| 5o | 7 | 7 | 7 | 18 | 9 | 8 | 5 | 9 | 4 | 9 | 2 | 6 | 5 | 3 |
| 5e | 11 | 19 | 16 | 13 | 10 | 15 | 19 | 19 | 12 | 7 | 7 | 13 | 18 | 8 |

Table 1 shows us that the most common categories are (1a) "intentionality and reciprocity" by the adult (80%), (2n) "naming" (86%) and (2q) "naming" by questioning (65%). According to MLE these types of behaviour are the basis for stimulation.

A third of the observed time (1t) "intentionality and reciprocity" led and initiated by the child (33%) and (3a) "transcendence" (32%) are present.

Between 11 and 16 % (3r) "transcendence through reflection" (16%), (4e) motivated "feelings of competence"

(14%) and (5e) "regulation by explanation" (11%) is present.
(P) "unexplained praise" (5%) or (5o) "regulation" (7%) are the most rare categories.

There are large differences between staff members as well as between different situations for the same staff member ( Palmérus et al, 1991). This stresses the importance of the activity in the observed situation.

The aim of the present study was to increase the skill of the caregivers. In order to find out if the staff have changed their behaviour, the means of the first third of the observations were compared to the means of the last third.

Table 2: Change in behaviour pattern over time for the whole group (X), and all staff members (J:, A:, V:,). The figures are the differences in the mean between the first third of the observations and the last third. * means preschool teachers, p= person , c= category of MLE.

| p/ c | X | J:1 | J:2* | J:3 | J:4* | J:5 | A:1* | A:2 | A:3 | A:4* | V:1 | V:2 | V:3 | V:4 |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 1a | 3 | -8 | +4 | -8 | -6 | +5 | +14 | +10 | -5 | +12 | +5 | -3 | +2 | +20 |
| 1t | 4 | -1 | +18 | +22 | +18 | +38 | -11 | -7 | +10 | -9 | +5 | +3 | -23 | - 7 |
| 2n | 2 | -2 | +7 | -5 | -6 | +6 | +-0 | -4 | -3 | +18 | +5 | +12 | -8 | +-0 |
| 2q | 4 | +7 | +4 | +7 | +24 | +13 | -11 | +10 | +1 | -6 | -12 | -4 | -5 | +16 |
| 3a | 18 | +6 | +16 | +20 | +47 | -5 | +25 | +13 | +27 | +53 | +23 | -5 | +9 | - 4 |
| 3r | 6 | +28 | +10 | -4 | +6 | +-0 | +9 | +10 | +11 | +30 | +16 | -40 | +7 | -11 |
| 4p | -2 | -+0 | +3 | -5 | +-0 | +4 | -6 | +8 | -7 | -21 | +1 | -1 | +-0 | + 4 |
| 4e | 8 | +9 | +9 | +18 | -1 | +-0 | +2 | +19 | +5 | +18 | +5 | +6 | +14 | - 4 |
| 5o | 1 | +10 | +6 | -8 | +2 | +10 | -7 | -3 | -4 | -15 | +3 | +5 | -2 | +10 |
| 5e | 9 | +13 | +18 | +22 | -1 | +17 | +9 | +15 | +20 | -4 | -3 | +5 | -7 | + 9 |

According to Table 2, the mean difference between the two periods increases between 1 and 18% for the different categories. "Transcendence" (3a) is the category which increased the most (18%). For one staff member it increased more than 50 %. This means that the staff members have learnt the MLE technique and adjusted their behaviour in accordance with it. "Regulation" and "feeling of competence" have increased 9 and 8 %. There have been many discussions in the guidance of the staff about toddlers' need of explanations, why they must do things in a different way or why they are good at something.

In the categories (3r) "transcendence" by reflection of the child and (1t) "reciprocity and intentionality" initiated or led by the child, the means have increased 6 and 5% respectively. For individual staff it has increased up to 30%. These categories are very important as they have the focus on the child and reflect the caregiver's sensitivity to the intention of the child and also to an understanding of the child. Categories with only a minor change (1 or 2%) are "(2n) meaning" by naming , (4p) unmotivated "feeling of competence" and (5o)"regulating" without explanation.

The staff have transformed their behaviour and developed their techniques, which means that they more often than before explain why something is good or must be done in a different way. They now follow the intention of the child and add an explanation to the naming of a subject.

Table 3. Sum of change per person and the mean change for the whole group.

| J1 | J2 | J3 | J4 | J5 | A1 | A2 | A3 | A4 | V1 | V2 | V3 | V4 | X |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| 62 | 107 | 83 | 61 | 88 | 29 | 71 | 55 | 118 | 48 | -22 | -13 | 35 | 65 |
| 80 | | | | | 68 | | | | 48 | | | | |

According to Table 3, there are great variations in the behaviour change among the staff members in A, J and V. This is due to several factors. Group J began at the same time as the project and had no well functioning organisation from the start. Group V had the highest scores from the start and had comparatively high means during the whole period. Their behaviour change is only marginal and they have not been equally able to increase their use of categories which are specially sensitive to the intentions of the child. In group A the greatest change was seen in the two staff members who joined the project late, which means that they never participated in the first week of education.

The staff is composed of two categories, preschool teachers and nursery nurses. The preschool teachers have had a higher level of education, involving 2 1/2 years' teacher training, while the nursery nurses have attended a 2-year upper secondary school course. If the change is analysed according to the education of the staff member, the sum of the preschool teachers' categories was 84% in J and 74% in A, which gives a total mean of 79%. Looking at the nursery nurses, the mean of all categories was 78% in J, 63% in A, and 48% in V, which give a total mean of 63%.

The mean difference among the preschool teachers was 8 % and only 3 % among the nursery nurses. The variations among preschool teachers were between +2 and +15%. Among the nursery nurses the variation was between -3 and +9%. It seems as if the better educated staff members have included more of the programme in their activities than the less well educated ones.

## DISCUSSION

The aim of this project was to increase the psychological and educational knowledge of the staff and to improve their interaction with the toddlers they care for.

The education course in the first week of the project taught the staff member about the capacity of toddlers and how to meet their needs. Staff members who joined the project after this first week had much poorer results at the first observation than the rest of the group. This means that in order to obtain a real baseline for the staff's behaviour we ought to have made the first videorecorded observations before the week of education. We believe that the improvement in the interaction of the staff with the toddlers is much greater than that presented in our results.

The MLE method and the teaching and guidance of the staff have increased their capacity to interact in a stimulating way with the children. According to the interviews, the staff members have changed their opinion about the need of education for toddlers. The education course in the first week brought about a considerable change of attitude, but to change the style of their interaction with the children, they need to look at and analyse the videorecorded films. These enabled the staff members to understand their own behaviour, as well as providing them with a knowledge of positive and negative aspects of it. Their improved ability to individualise and to take the viewpoint of the toddler is very clear.

However, not all staff members have changed their interactive behaviour to the same extent. A few only improved the more mechanical categories "reciprocity and intentionality", as well as "naming". Some staff members also show less progress regarding their ability to focus on the child's needs and thinking.

The staff members who made most progress were often preschool teachers with a great interest in educational methods. This implies that there is a link between the educational level of the staff member and efficient use of the MLE method. efficiently. It also means that work with toddlers demands great ability and knowledge. Staff must be able to understand children who are not yet able to communicate verbally.

Our work with the staff in the child care centres often revealed poor organization. The discussions on the content of the videofilms have led to reorganisation of the structure of the work, and thereby increased the possibility of individualising and stimulating the toddlers in a better way. The work with MLE demands a firm organisation, where the staff members focus on how to stimulate the child. MLE does not mean that the staff member uses special equipment or material, but everything the staff members do is done in a conscious way and they benefit from every possible situation. Every interaction is used to improve the child's perception as well as its thinking. There is a risk with MLE of the adults becoming too active. Our results show how, in some situations, adults more frequently initiate or lead the interaction, giving less opportunity to the toddlers to initiate activities themselves. Klein herself (op.cit) says that 20% of MLE stimulation a day is enough.

In the work with toddlers in day care, staff members often look upon themselves as substitute mothers. In this project we have stressed the pedagogical aspects of child care. If we really try to fulfil the demands of "educare", it is easy to understand the different effects of behaving like a mother or a staff member have on interaction with the child. In day care we cannot, and should not, substitute for the mothers. But if we develop and/or improve methods useful for care and education in groups of toddlers, we will be able to complement the work of the mothers and stimulate the development of the children in a profitable way.

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# GETTING IT TOGETHER: A STUDY OF EARLY CHILDHOOD TRAINING

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## Background

Prior to 1988 all students wishing to train to become kindergarten teachers undertook a 2-year training course at one of six teachers' colleges, now known as colleges of education. Students wishing to train to be childcare workers had a variety of options including a 1-year course at a teachers' college or college of education, or undertaking field-based training. A number of other qualifications were recognised for funding in the childcare area, but those which were specifically childcare qualifications were of varying standards and none equalled the length and breadth of kindergarten training courses.

In June 1985 the Minister of Education approved the establishment of a working party to examine 3-year training for kindergarten teachers.[1] A second working party on childcare training reported in December 1986.[2] Included in the terms of reference of the childcare working party was the requirement "to examine the three-year report on kindergarten teacher training and suggest ways of incorporating childcare training within its recommendations". In its report the working party recommended that "any training development for childcare be viewed as part of an integrated early childhood qualification, which should be a three-year, common-core course in early childhood education, or its part-time equivalent".

The report of the working party for kindergarten teachers had already recommended that 3-year training be implemented in two colleges per year over a 3-year period. This course of action was accepted by the Department of Education. In 1988 Dunedin and Palmerston North enrolled the first intake of trainees undertaking the new integrated training course for kindergarten teachers and childcare workers. Christchurch and Hamilton followed in 1989, and Auckland and Wellington in 1990.

## The Research Project

The New Zealand Council for Education Research (NZCER) received a modest grant in 1988 and 1989 from the then Department of Education to enable a researcher to gather baseline data from the various intakes of students who entered the colleges to undertake the new courses of integrated training for early childhood education. The study has since been funded by NZCER. The focus of the study is to find out:

- Why students choose to train for early childhood education when they begin their training
- What early childhood service they expect to work in when they complete their training
- Where students are employed when they complete their training.

## Methodology

The researcher visited each college at the end of the first year the colleges received students. She made return visits at the end of the students' second and third years. In each case students completed a questionnaire after a group discussion. In 1991 the students in Dunedin and Palmerston North were surveyed by postal questionnaire to ascertain their first teaching position and to comment on some of their experiences. Third-year students in Hamilton and Christchurch, and second-year students in Auckland and Wellington, will be asked to complete a further questionnaire in the third term of 1991.

## This Report

This report includes findings from each year of our study, but as the study is ongoing it is important to note that we have complete data across all colleges from first-year students only. Because the new course of early childhood training was introduced by 2 colleges per year, our data for second-year students apply to 4 colleges only - Hamilton, Palmerston North, Christchurch and Dunedin - and our data from third-year students are from 2 colleges only - Palmerston North and Dunedin. The third-year data are further limited by the fact that most Dunedin trainees are also preparing for a BEd degree, which meant that many of them were full-time university students in their third year and are not completing the college component of their course until their fourth year in 1991. For this reason, most of our data from third-year students are from Palmerston North, as are our data from year one teachers. Furthermore, because the introduction of the course has been staggered across colleges, students began their training in different years. We have attempted to compare student responses across colleges according to whether students were in their first, second or third year, but in our study there is a difference of 3 years between when the first and third intakes began their training. In a rapidly changing educational world, differences in starting dates may also influence students' attitudes towards various issues.

### Sample

Table 1 shows the number of students by college who completed questionnaires in each year.

Table 1

*Students who completed questionnaires*

| | Year One | Year Two | Year Three | Year Four |
|---|---|---|---|---|
| 1988 | Pm.Nth N=44<br>Dn N=28 | | | |
| 1989 | Hn N=37<br>Ch N=51 | Pm.Nth N=36<br>Dn N=27 | | |
| 1990 | Ak N=99<br>Wn N=57 | Hn N=30<br>Ch N=32 | Pm.Nth N=32<br>Dn N= 8 | |
| 1991 | | Anon = 3 | Anon = 3 | Pm.Nth N=29<br>Dn N= 9<br>(Students now first-year teachers) |
| Total | 316 | 128 | 43 | 38 |

### First-Year Students

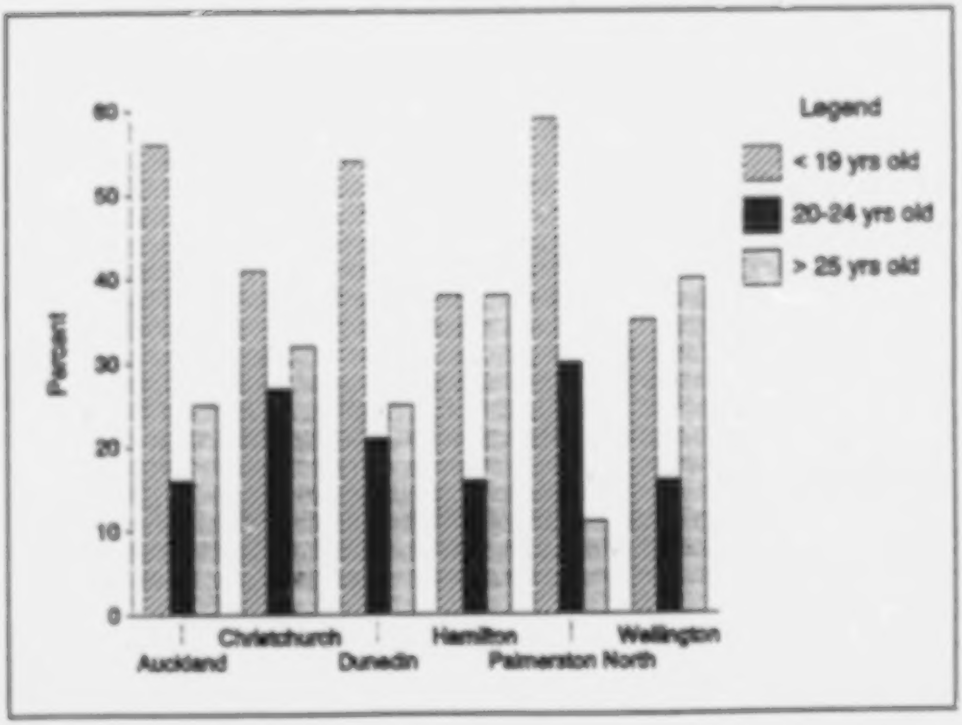
*Gender:* Of the 316 students who completed the questionnaire, 302 (96%) were female and 10 (3%) were male. Christchurch had a disproportionate number of male trainees - four out of the ten males came from this college.

*Age:* Half of the students, 151 (50%), were 19 years or younger; 64 (21%) were between 20-24 years of age; 89 (29%) were 25 years or older. Palmerston North students tended to be younger than those in the other colleges with only 5 students (11%) 25 years of age and older. In the other colleges between 21% and 42% of their students were 25 years or older.

Figure 1

*Age of Students*

(N = 304)

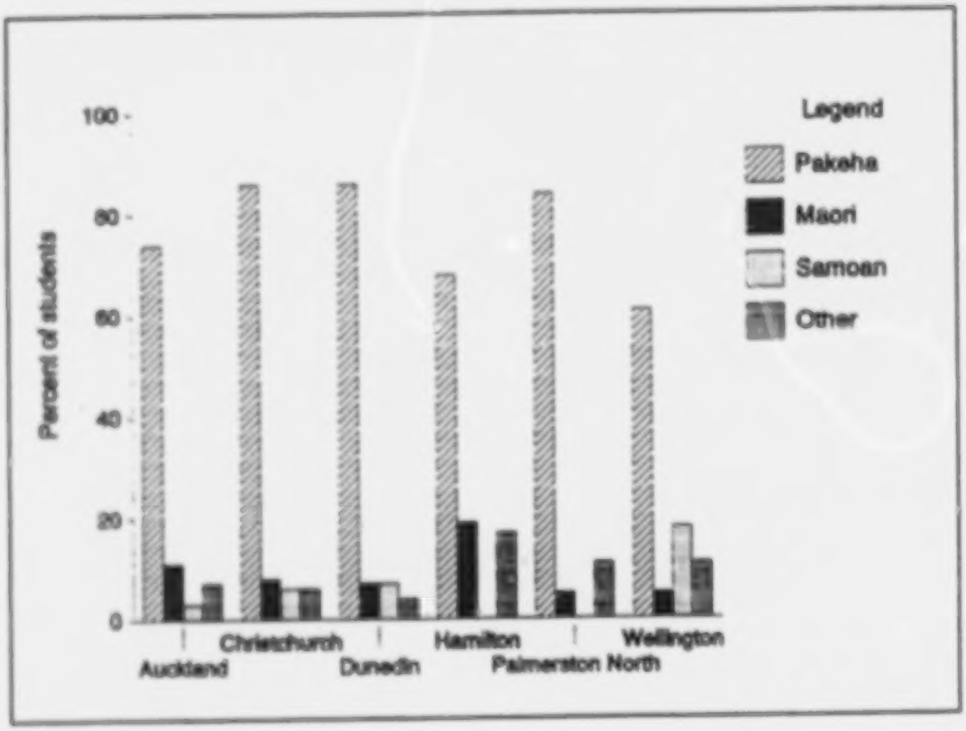


***Ethnicity:*** Three-quarters of the students (235) described themselves as Pakeha or Non-Maori New Zealanders. A further 25 (8%) described themselves as Maori. More than a quarter (27%) of the students who described themselves as Maori were from the Hamilton College of Education. The third largest group of students described themselves as Samoan (16), most of them attending the Wellington College of Education.

As one would expect, English is the first language of most students (88%), followed by Samoan (4%) and Maori (3%). Other languages mentioned include Polynesian, Asian, Tokelauan, Cantonese, African, Korean, and Tongan.

Figure 2

*How would you describe yourself?*
(N = 307)



**Previous Early Childhood Experiences**

***Secondary Work Experience:*** Almost half (46%) of the students said they had secondary school work experience in an early childhood centre and for most this had influenced their decision to train in this field. This was particularly true in Dunedin, where all 12 students who had had secondary work experience in early childhood centres said this had influenced their decision to train in early childhood education.

***Students as Parents:*** One-quarter of the students (80) were themselves parents. All but 2 of the parents had used early childhood services for their own children. Most had used either 2 or 3 services with 1 parent using 6 services and a further 4 parents using 5 early childhood services.

The early childhood services used most often were:
- NZ Free Kindergarten (67%)
- Playgroup (41%)
- Playcentre (37%).

A quarter of the parents indicated that their children had attended an all-day childcare centre; 24% had their child minded regularly be a paid caregiver. Thirteen parents (16%) had attended a kohanga reo with their children, and 11 parents (14%) had used sessional childcare. Private kindergartens and Pacific Island language nests were both used by 7 parents (9%).

***Work in Early Childhood Centres:*** More than half of the trainees (171) said that they had worked in an early childhood centre before they started the course, often in more than one. Sixty-five were volunteers, 63 indicated that they were paid employees, and 30 were parent helpers. The remaining students fell into an "other" category which included untrained reliever, nanny trainee, and school work experience.

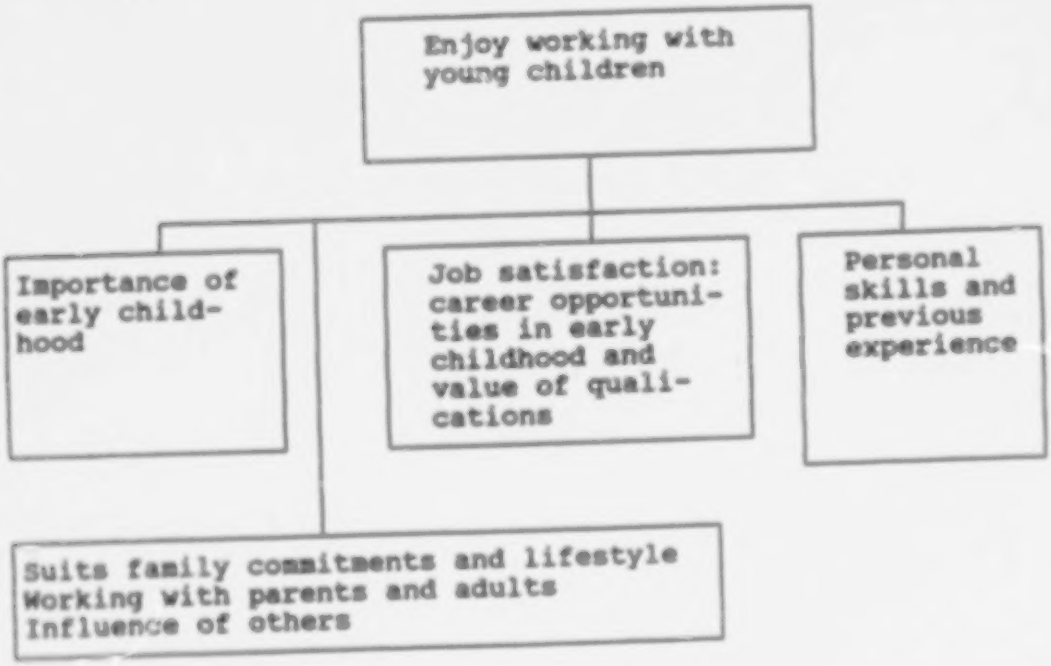
As such a high proportion of trainees had had some experience of early childhood services before entering college, it is not surprising that virtually all students felt they knew something about early childhood training when they started the course, with 80% saying they knew either 'a little' or 'quite a bit'.

### Reasons for Choosing Early Childhood Education

The students were asked to respond to the statement "I chose to train for early childhood because . . .". The reasons given by students are summarised in the diagram below.

Diagram 1

*Reasons for training for early childhood*


Enjoy working with young children
Importance of early childhood
Job satisfaction: career opportunities in early childhood and value of qualifications
Personal skills and previous experience
Suits family commitments and lifestyle
Working with parents and adults
Influence of others

***Enjoy Working with Young Children:*** The most common reason given by most students for wanting to train to work in early childhood was a love of young children and pleasure in their company. Such students also often commented that they had wanted to work with this age group for a number of years.

***The Importance of Early Childhood:*** About a third of the students referred to the importance of the preschool years which many regard as the basis for or key to future education and experience:

> I believe early childhood is a vital part of education and I want to contribute in the best possible way.
>
> I believe the years 0-5 are the most important in development. I want to be involved in children of this age group and feel that I was contributing to their development.

Students frequently referred to an interest in child development and a desire to find out more about how children learn and develop. For some, this was because of a strongly held belief in children's rights - all children have a right to care and education. Students want to play their part in providing a loving and supportive environment which will help children develop their own self-esteem and empower them.

***Job Satisfaction:*** About a third of the students also referred to job satisfaction and career opportunities in early childhood education. For some, particularly those who enrolled in the first years of the new integrated training course, it was because they thought early childhood was an expanding area:

> I felt it is a growth service at present with exciting things happening and I want to be part of it.
>
> Growing industry: early childhood really starting to go places.

Others saw training for early childhood as enabling them to get started on a stable, secure career which would be "rewarding" and "challenging". Early childhood provides an opportunity to work with people, rather than to work in an office. The work is varied, with scope for personal initiative. Several students said they wanted to work in education and they preferred early childhood to primary or secondary because of the more "relaxed atmosphere". (One or two students also acknowledged that their academic qualifications would not have enabled them to enter training for other branches of the education service.) The hours of work and regular holidays are also attractive. Early childhood training provides students with qualifications which would be useful for overseas travel or for work in areas of particular interest, such as caring for special needs children or as a nanny. Yet others liked early childhood education because it was a community-based service.

Students also commented on the importance of gaining professional qualifications and the fact that a qualification in early childhood could be a useful basis for further, more specialised training, for example, one student thought she would later like to train to be a child psychologist and another wanted to be a speech therapist. Students enrolled at the university considered the degree "an extra plus".

***Personal Skills and Previous Experience:*** About a quarter of the students referred to skills they had which made them particularly suitable for working with young children. These were commonly personal qualities such as "energy", "patience", "a sense of humour", or an "ability to communicate with young children". They felt their experience showed that not only did they like young children but young children enjoyed them:

> I feel I have a great relationship with all children. They like me and I like them.
>
> I can offer them a great deal - ideas, time, love.

Other students said that they had particular skills such as artistic abilities which would be useful. A number of students referred to experiences they had had in a range of early childhood services including working for the Crippled Children's Society, social work, being a parent helper at school, being involved with families as a minister's wife, and work experience as a school pupil. This work was frequently voluntary, but there were students who had previously been in paid employment in early childhood, including those who had worked overseas.

Several students referred to earlier work in a kohanga reo, which they had usually done without special training, and they now thought that both for their own satisfaction and the sake of the children with whom they were working, they should undertake more formal training. One student said she wanted to "take the Pakeha knowledge to te kohanga reo enhancing the parallels between the two systems". These students usually had a particular desire to work with Maori children. A similar group were interested in being closely involved with Pacific Island children.

Several students said they thought their experience as a parent qualified them particularly for work in the area.

***Miscellaneous:*** In a range of other comments there were students who referred to the fact that a career in early childhood fitted in with their lifestyle and family commitments. When students spoke of family commitments, they were sometimes talking of their own children who were also preschoolers, but in other cases it was older children becoming less dependent and so enabling the parent(s) to train for a career themselves. Some solo parents were interested in providing a "secure future" for themselves and their children. Yet another group of students were looking forward to the time when they would become parents and they thought an early childhood training, as well as leading to a job now, would also prepare them for their parenting role.

A few students said they wanted a career where they worked with adults as well as children. One or two of these had been influenced by the women's movement and wanted to work "with and for women"; a few referred to the influence of others, usually mothers, in their decision to train for early childhood; and a few said they were training for early childhood because other careers were difficult to get into. One or two were motivated by religious conviction.

### Commitment to Early Childhood

In an attempt to ascertain whether students were committed to work in early childhood or would perhaps prefer to work elsewhere, we asked them to respond to a series of statements:

- Working in early childhood was my first choice of career.
- I would have preferred to train as a primary teacher.
- I would have preferred to train as a secondary teacher.
- Apart from breaks for personal reasons (e.g., travel, family), I expect to make a lifelong career in early childhood education.
- I rather "drifted" into early childhood education.
- Being a student is probably as important to me as thinking about my future as an early childhood worker.
- Had it been possible, I would have preferred to do field-based training.

The student responses across all colleges are summarised in Table 2.

Table 2

*Students' commitment to early childhood education*

| Statement of motivation | No. of students | % of students |
|---|---|---|
| Early childhood lifelong | 199 | 65 |
| Early childhood first choice | 186 | 60 |
| Enjoy being a student | 106 | 34 |
| Drifted in | 45 | 16 |
| Prefer primary | 32 | 10 |
| Prefer field based | 56 | 17 |
| Prefer secondary | 3 | |

It will be seen that when they began their training, about two-thirds of the students over all indicated that they intended to make a lifelong career in early childhood and that early childhood was their first choice of career. However, a third also said that being a student was as important to them as thinking about their future as an early childhood worker. There were variations by college in the students' responses to these questions. Some of these were:

- Students in Dunedin were most likely to say early childhood education was their first choice of a career (75%), and students in Hamilton (54%) and Auckland (58%) were least likely to say this was the case.
- Students in Dunedin were also most likely to regard early childhood education as a lifelong career (75%), as were students in Hamilton (70%); students in Wellington (56%) and Auckland (61%) were least likely to see it as a lifelong career.

- Students in Palmerston North were the most likely to say they rather "drifted" into early childhood education (27%), while 22% of students in Christchurch also responded in this way.
- Students in Hamilton were the most likely to say there would have preferred a field-based training (27%), followed by Christchurch (20%) and Wellington (19%). Only 3 Dunedin students indicated this was the case.
- Of the 32 students who said they would have preferred to train for primary teaching, 14 came from Auckland and 7 from Palmerston North. Several of these latter students commented that when they enrolled they had thought the course was intended to prepare students to work with children from birth to 8 years.

### First Year Students who Expect to Complete the Course of Training

At the end of their first year, most students expected to complete their course. The percentage was highest in Dunedin and Palmerston North where 89% of students thought this would be the case, and lowest in Wellington, 74% of students. Only five students from all colleges said that they did not expect to complete the course, most of the remainder being at this stage 'unsure'. The most common explanation was financial problems. Family considerations, travel, and a wish to pursue other careers were reasons given by other students. A few students from each college said they did not like the course.

### Preferred Early Childhood Service

***First Year Students:*** It was common for students beginning their training to have a clear idea of which early childhood service they would like to work in when they completed their training, although there was some variation between colleges, as can be seen in Table 3.

Table 3

*Students who have a clear idea of preferred early childhood service (N = 315)*

| College | N | % |
|---|---|---|
| Auckland | 66 | 67 |
| Hamilton | 26 | 70 |
| Palmerston North | 34 | 77 |
| Wellington | 37 | 65 |
| Christchurch | 39 | 77 |
| Dunedin | 15 | 56 |
| Total | 217 | |

Overall, nearly 70% of students across all colleges said they had a preferred service in mind, but the percentage of students by college ranged from 56% in Dunedin to 77% in Palmerston North and Christchurch.

*Students who prefer kindergartens:* Of the students who said they had a preferred service, a high proportion, 78% over all, indicated that their preferred service was a kindergarten. Once again there were variations by college, as seen in Table 4.

### Table 4
### *Percentage of students with a preferred service, who prefer kindergarten*

| College | N | % |
|---|---|---|
| Auckland | 44 | 67 |
| Hamilton | 15 | 58 |
| Palmerston North | 29 | 85 |
| Wellington | 29 | 78 |
| Christchurch | 36 | 92 |
| Dunedin | 13 | 87 |
| Total | 166 | |

Although, over all, 70% of those students who said they had a preferred service said they preferred kindergarten, this was least likely to be the case in Hamilton, where only 58% of students said they preferred kindergarten, and most likely to be the case in Christchurch, where 92% said kindergarten was their preferred service. It is important to stress that the percentages we are talking about refer to those students who said they had a preferred service in the first place. If we take the sample as a whole and look at the percentage who say they prefer kindergarten, the percentages are considerably lower, as seen in Table 5.

### Table 5
### *Percentage of all students who prefer kindergarten*

| College | N | % |
|---|---|---|
| Auckland | 44 | 44 |
| Hamilton | 15 | 41 |
| Palmerston North | 29 | 66 |
| Wellington | 29 | 51 |
| Christchurch | 36 | 71 |
| Dunedin | 13 | 46 |
| Total | 166 | |

*Students who prefer childcare:* Fourteen percent or fewer of those students in all colleges who said they had a preferred service indicated that child care would be their preferred service. Once again there were differences by college, ranging from only 5% in Hamilton, to 14% in Dunedin. (The actual number of students in each case is small - Auckland 8, Hamilton 2, Palmerston North 3, Wellington 6, Christchurch 4, and Dunedin 4.)

*Students who prefer nga kohanga reo or Pacific Island language nests:* Nga kohanga reo and Pacific Island language nests are the preferred service of a small number of students. Nga kohanga reo were mentioned by 5 students in Auckland and Hamilton, 2 in Wellington and Christchurch, and none in Palmerston North and Dunedin. Pacific Island language nests were mentioned by 5 students in Wellington, 2 in Auckland and Christchurch, 1 in Hamilton and Dunedin, and none in Palmerston North.

*Students who prefer other early childhood services:* Ten per cent of students across colleges referred to early childhood services outside the mainstream, for example, working as a nanny, working with special with special needs, and being an education officer.

*Second- and Third-year Students:* Students in their second and third year were also asked if they had a clear idea of which service they would like to work in. We have already seen that when they began their training 70% of students said they had a clear idea. In the second year this percentage had increased to 77%. These responses varied by college, 92% of Palmerston North students stating they had a clear idea of what service they would like to work in compared with 60% of Hamilton students. In both Christchurch and Dunedin the percentage was 78%. By their third year, 88% of students over all said they had a preferred service.

The preferences of second-year students by college are summarised in Table 6.

Table 6

*Preferred service of second-year students on completion of training (N = 118)*

| Service | Christchurch<br>% | Hamilton<br>% | Palmerston North<br>% | Dunedin<br>% |
|---|---|---|---|---|
| Kindergarten | 56 | 65 | 59 | 63 |
| All-day childcare | 19 | 20 | 21 | 22 |
| Sessional childcare | 9 | - | 5 | 11 |
| Kohanga reo | 3 | 10 | - | 4 |
| Pacific Island language nest | 3 | - | - | - |
| Other | 9 | 5 | 15 | - |
| Total | 99 | 100 | 100 | 100 |

*Students who prefer kindergarten:* Kindergarten remains the most preferred service of second- and third-year students, although the percentage of students with this preference dropped from 78% in their first year to 61% in their second. In the third year, the percentage rose again to 69%. (In interpreting these data, it must be stressed that the information for second- and third-year students is incomplete and the third-year data are based largely on Palmerston North students. The pattern may well change when data from all colleges are eventually included.)

*Students who prefer childcare:* Compared with the 14% of students in their first year who said they would prefer to work in childcare, both sessional and all day, 27% of students in their second year indicated that this was the case. In the third year this percentage had dropped back to 13.

*Other preferred services:* There were also several other early childhood services mentioned by students, for example IHC/early intervention and Montessori.

### Reasons for First-year Students' Choice

***Kindergartens.*** There were 3 main reasons given by students who said they would prefer to work in a kindergarten, and all were by way of comparison with childcare.

- Firstly, the pay and conditions of service, including hours of work, "time out" between sessions, time for preparation, and holidays. (Several students noted that the kindergarten salaries were still too low but at least more reasonable than childcare.) Trainees also believe kindergartens are better equipped than childcare centres.
- Secondly, trainees prefer the slightly older children in kindergartens. They also think the narrower age group of children easier to manage, particularly with different groups in the afternoon from the morning, and that this perhaps allows the teacher to spend more time with individuals. Some said they found working with older children "more of a challenge", others said they preferred them because of their more advanced language development, and others commented that they were not comfortable with infants and toddlers.
- Thirdly, trainees believe kindergartens are better organised and have more "structured" programmes. Kindergartens are regarded as more "educational" and the children better disciplined. Children attend more regularly, with less "coming and going". Several trainees referred to childcare centres as places where carers just "looked after children all day". They wanted to be involved in an "educational programme" rather than "just babysitting". Such students are likely to say they prefer to be involved with "children's learning" rather than to have to spend time on routine toileting and feeding, particularly the "mucky jobs".

Other aspects mentioned by a smaller number of trainees were that they only had experience of kindergartens, so they did not know much if anything about childcare before they started training; that they thought the relationship with other trained staff in kindergarten would be more stimulating; and that they believed kindergartens provided better career opportunities.

***Childcare.*** There were 3 main reasons given by students preferring childcare:

- Firstly, centres are open for longer hours and families tend to have contact over longer periods of time. This means that staff get to know both parents and children better. Because the relationship with parents and staff is closer, more of a family atmosphere is established.
- Secondly, students enjoy working with a wider age range, particularly the opportunity to work with younger children - the younger the age, the more dramatic the development.
- Thirdly, students believe childcare provides a much needed social service for working parents, particularly lower income families, and they hope more qualified staff in the service will help change community attitudes towards childcare.

***Nga kohanga reo and Pacific Island language nests.*** Trainees who chose nga kohanga reo or Pacific Island language nests as their preferred service did so almost exclusively because of the importance they placed on children learning and retaining the languages and cultures involved.

When second- and third-year students were questioned about their reasons for preferring a particular service, the reasons they gave were similar to first-year students.

### Reasons Students Did Not Want to Work in a Particular Service

First-year students were asked if they had any reasons for thinking they might *not* wish to work in particular kinds of early childhood services. The students' responses by college are summarised in Table 7.

### Table 7

*Students who did not want to work in a particular service*

| College | N | % |
|---|---|---|
| Auckland | 28 | 28 |
| Hamilton | 9 | 24 |
| Palmerston North | 20 | 49 |
| Wellington | 7 | 12 |
| Christchurch | 14 | 28 |
| Dunedin | 6 | 25 |
| Total | 84 | |

It will be seen that about 30% of the students over all said they had reasons for *not* wanting to work in particular centres, but there were quite marked differences in the students' responses by college, ranging from only 12% of students in Wellington, compared with 49% in Palmerston North, who said they had reasons for thinking they might not want to work in a particular service. (The pattern did not appear to change much in the second and third year. The overall percentage increased slightly in the students' second year to 35%. Thirty-three per cent of those students who responded in their third year also said this was the case.)

Of the first-year students who answered "Yes" to this question, the majority said they had reasons for not wanting to work in childcare - either full day or sessional centres. By far the most common reason was poor pay and working conditions, including long hours and short holidays. As one student commented:

> My image of child care was of unqualified workers with a poor teacher/pupil ratio. I didn't want to be part of it - long hours, less pay, fewer holidays.

In a range of other reasons, mentioned by only 2 or 3 students in most cases, students referred to childcare being just a "babysitting service", to children being better off at home with their mothers; to the lack of structure in the programme and their lack of interest in working with very young children - "crying babies and nappies!"

Another group of students said they had reasons for not wishing to work in either nga kohanga reos or Pacific Island language nests. This was almost always because they could not speak Maori or a Pacific Island language and had limited knowledge of the cultures.

When second- and third-year students were questioned about their reasons for *not* wanting to work in a particular service, the reasons they gave were similar to first-year students.

### Students Who Had Changed Their Mind About Preferred Service

***First-year Students:*** Students were asked if they had changed their mind about their preferred service since they had been at college. Table 8 summarises their responses by college.

Table 8

*Students who had changed their mind about their preferred service*

| College | N | % |
|---|---|---|
| Auckland | 15 | 15 |
| Hamilton | 4 | 11 |
| Palmerston North | 14 | 33 |
| Wellington | 7 | 12 |
| Christchurch | 18 | 35 |
| Dunedin | 6 | 26 |
| Total | 64 | |

Overall, about 22% of students across all colleges had changed their mind about their preferred service since the course began, but there were differences between colleges ranging from only 4 students in Hamilton (11%) to 18 students in Christchurch (35%).

The majority of the students who said they had changed their mind had previously indicated that they would prefer to work in kindergarten, with some being uncertain at the beginning of their training as to which service they preferred. Many of them still did prefer kindergarten, but they indicated that at least they were now prepared to consider other services, particularly childcare. Of those students who had previously thought they would like to work in a kindergarten, most indicated that the experiences they had had on the course - particularly practical, enjoyable experiences in the field - had made them realise that they could work in childcare. They also found they quite enjoyed the younger and mixed-age group:

> At the beginning I wanted to work in a kindergarten but since then I've been posted in a day care and I really, really enjoyed it. I like having the mixed age groups and having the children for the whole day rather than the half day.
>
> I have changed my idea on child care being dens of unhappy, deprived children. If I could not get a job in a kindergarten I would consider a job in child care if I could have some control over policy making.
>
> I haven't changed my mind completely but I feel much more comfortable with infants and toddlers and feel I could enjoy working with them now that I have experience - very rewarding.
>
> A realisation that teachers in child care do more teaching than I originally realised.

There is a feeling amongst some students that you are "more needed" in childcare and that by having children for a longer time from an earlier age, teachers get to know parents and children better and are more influential.

One student, who originally said she wanted to work in a kindergarten, now wrote:

> I want to concentrate on special needs children and intend to (in the long term) become part of an early intervention team, in which case I see myself as going to all the centres in this capacity. This idea has built up over the year.

The students who had originally said they preferred child care were still happy to work there but had realised they could work in either setting. They had become increasingly aware of the longer hours and less attractive working conditions of childcare.

***Second- and Third-year Students:*** In their second year, 30 (23%) of students said they had changed their mind about which early childhood service they would like to work in when they had finished their training. In their third year the figure was 8 (19%). Students often ticked more than one category. Their responses indicate that they are now more receptive to the possibility of working in a wider range of services than had been the case when they began their training.

### Services for Which Course Prepares Students

Second- and third-year students were asked to indicate what services their training was preparing them for. Table 9 summarises their responses.

Table 9

*What services the course is preparing students for*

*N = 171*

| Comment | 2nd Year % | 3rd Year % | Total % |
|---|---|---|---|
| Equally well kindergarten/ childcare | 58 | 51 | 56 |
| Prepared for all services | 25 | 14 | 22 |
| Favours kindergarten | 14 | 35 | 19 |
| Favours child-care | 1 | - | 1 |
| No response | 2 | - | 2 |
| Total | 100 | 100 | 100 |

It will be seen that more than half (57%) of second- and third-year students over all believe their course is preparing students equally well for work in kindergartens and childcare, along with a further 23% who think their training is preparing them for work in all early childhood services. The remaining students, 20% over all, believe their course of training favours kindergartens. There were some differences by college in the responses of second-year students. In particular, a higher proportion of Hamilton students than those in other colleges thought they were being prepared for all services.

### Teaching Practice

Second- and third-year students were questioned about the number and range of teaching practice sections they had been on. One factor influencing the kind of practice experience offered to students is availability of centres. A higher proportion of students had had teaching practice sections in kindergarten than in childcare centres (all day and sessional) - 78% compared with 66% of trainees. A few students had had sections in each of a range of other centres - creches, playcentres, playgroups, nga kohanga reo, Pacific Island language nests, Montessori, IHC, Crippled Children, and new entrant classes. Some of these latter were for short periods of about a week compared with the more usual placements of 4-6 weeks.

As well as regular sections, students from all colleges paid shorter visits to a range of early childhood centres for a variety of reasons. It is hard to quantify these but of all the colleges, students in Hamilton were likely to have made more frequent visits to the widest range of centres. Ninety-three per cent of Hamilton students indicated that they had visited one of a range of centres. This percentage compares, for example, with only 19% of students from Palmerston North.

### 1991 Survey of First-Year Teachers

In May 1991 a questionnaire was sent to the trainees in Palmerston North and Dunedin to find out how many were now employed in early childhood centres, and to look at their attitudes towards the course, and the training they had received. The questionnaires were sent to 46 people of whom 38 (83%) replied. Nine of these replies were from Dunedin and 29 from Palmerston North. (Fourteen of our original intake of students from Dunedin were back in college in 1991 for their third year of training, having been at the university in 1990 as part of their BEd course.)

**Present situation for those working:**

*Employment:* We asked the trainees if they were working for an early childhood service:
- 30 (79%) were employed in an early childhood service
- 8 (21%) were not employed in any early childhood service.

*Number of jobs applied for:* Most trainees had applied for at least 1 to 2 jobs in early childhood centres, and 3 people had applied for more than 6 jobs. These figures are shown below in Table 10.

Table 10

*Number of early childhood jobs applied for by trainees*

*(N = 36)*

| Number of jobs | N | % |
|---|---|---|
| None | 8 | 22 |
| 1 - 2 | 10 | 28 |
| 3 - 4 | 8 | 22 |
| 5 - 6 | 7 | 19 |
| 7+ | 3 | 8 |
| Total | 36 | 99 |

*Type of employment:* When asked what service they were working for, the majority of trainees stated they were working in kindergartens:
- 21 (72%) working in kindergartens
- 4 (14%) working in all-day childcare
- 3 (10%) sessional childcare.

Five people indicated they were relieving teachers; one of these was working in a variety of different centres and the others are included in the kindergarten figures.

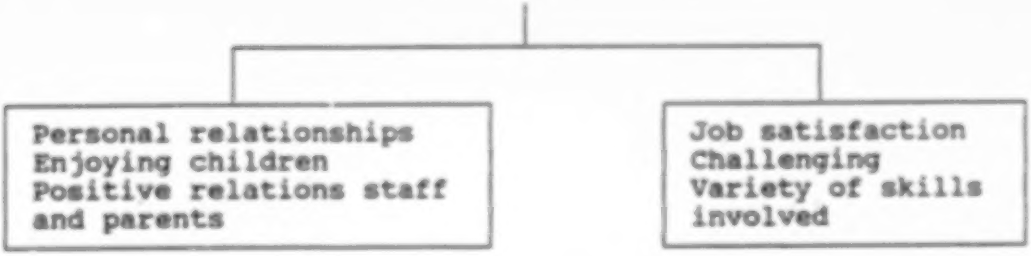
*Working in first choice of employment:* When asked if their present job was their first choice of service, 25 replied "yes" and 5 "no". Of the 5 that answered "no", the reasons given for the job not being in the service of their choice were as follows:
- Two people chose the option - "There are no jobs in your first choice in the area you live in."
- Two people chose the option - "You took the first job that was offered to you."
- One person chose - "The working conditions in your first choice were not good enough."

*Length of time in position:* Most trainees, 15, expect to stay in their present position for 1 to 2 years; 5 for 3 to 4 years; 4 for less than 12 months; and 5 are unsure.

*General comments about their job:* Trainees were given the opportunity to make any comments they wished about their present job. Most of their comments were positive and tended to fall into two overall categories - an enjoyment of relationships with children, staff, and parents; and an awareness of the personal resources the trainees were using in their jobs as shown by Diagram 2.

**Diagram 2**

*Comments on present job*



Teachers made general comments about their job which "they enjoyed a great deal", as well as more specific comments about their pleasure in working with the children and the positive and supportive relationships they had developed with staff and parents. The fact that staff and parents regarded them as competent increased their own confidence. The first-year teachers were challenged by the demands placed on them and the skills needed to do the job but they appeared to be coping well. There were also several positive comments about the pleasant, relaxed environment and the fact that centres were well equipped. Negative comments included reference to inadequate staff-pupil ratios in 2-teacher kindergartens, and primary school teachers needing a better knowledge of the early childhood curriculum.

**Present situation for those not working:**

Ten people replied to the question "What are your reasons for not working in an early childhood service?" (These 10 responses included 2 relieving teachers and the 8 people who indicated they were not working in an early childhood centre.) The reasons given were as follows:

- 7 continuing BA or BEd (6 from Palmerston North, 1 from Dunedin)
- 1 had taken position as school co-ordinator
- 1 had difficulty finding work in local area
- 1 decided not to work in early childhood services.

*Consider work in early childhood services in the future:* Trainees were then asked if a job were available would they work in early childhood services in the future. (This question was answered by the 8 people not working in a service, and 3 relieving teachers):

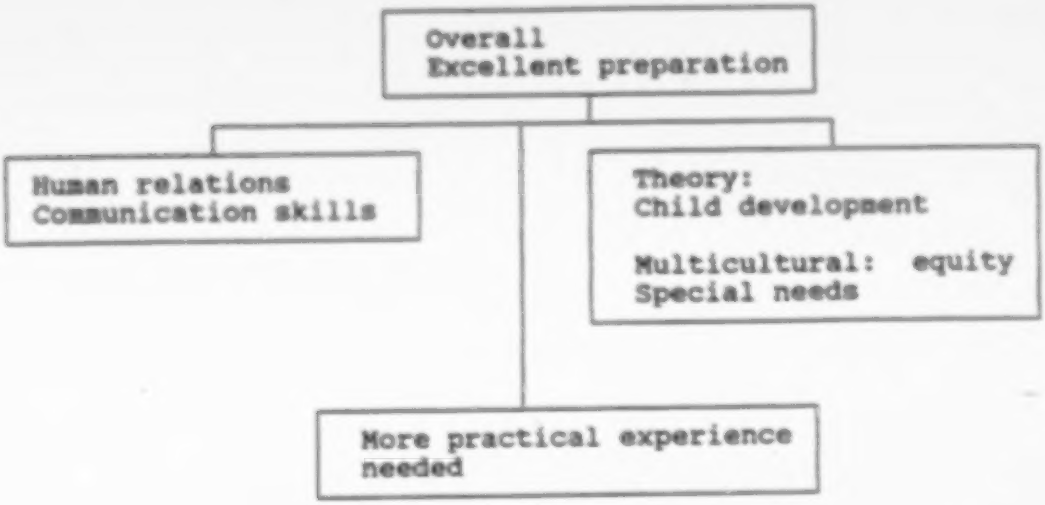
- 9 indicated they would work in an early childhood service in the future
- 2 indicated they would not work in an early childhood service in the future.

**Comments on how training prepared trainees for work in early childhood services:**

Trainees were given the opportunity to make general comments on how their training had prepared them for work in early childhood education. Their responses are summarised in Diagram 3.

Diagram 3

How Training has Prepared for Work



More than half of those responding made general, positive comments to the effect that their training had prepared them well for working in early childhood services:

> Overall, it gave me an excellent training to prepare me for work.
>
> When I think about what I knew about early childhood education when I first started and what I know now - I learnt so much. Overall, I think training college prepared me as best it could, the rest of the learning comes with experience in the job.
>
> College gave me a good overview of ECE as a whole. Three years of notes are now an invaluable resource!

First-year teachers were also appreciative of the fact that their communication skills and ability to relate to other people, both children and adults, were improved by their college experience.

> Human relations classes helped me become prepared for working with a variety of people.
>
> Fostered ability when working with parents. Developed skills in forming personal and professional relationships.

First-year teachers also think the college prepared them well in giving them a theoretical basis for their work with young children by increasing their knowledge of child development and how children learn.

> The lecturers were people from the services and were able to relate the theory to the practice. Only now that I'm working the theory makes more sense, and I am able to draw on my own conclusions.
>
> Professional studies incorporated a lot of theoretical things about children's learning development etc., which has been really useful.
>
> It gave me the knowledge to make decisions that enhance children's learning.

A few teachers also referred to their heightened awareness of multicultural issues along with preparation for work with children with special needs.

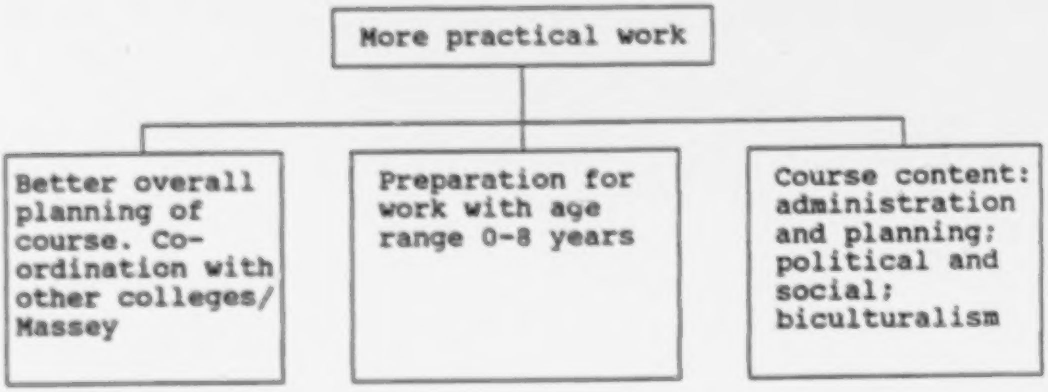
There were a few critical comments about the college programme, usually made by individual teachers; for example, one who thought there had not been sufficient emphasis on services outside the mainstream, and another who considered individual courses to be "irrelevant". The main criticism made by more than one teacher was a belief that the course would have been improved by more practical experience, particularly in the third year.

**Comments on improving training:**

Trainees were asked if they had any suggestions as to how their training could be improved. Their comments tended to focus on two areas - course organisation and course content, as shown by Diagram 4.

Diagram 4

*Suggestions on improving training*


More practical work
Better overall planning of course. Co-ordination with other colleges/ Massey
Preparation for work with age range 0-8 years
Course content: administration and planning; political and social; biculturalism

The most common suggestion as to how their course of training could have improved, made by about half of the first-year teachers, was that there should have been more practical experience in a greater variety of centres.

> I think more practical training would have prepared me for the job more easily especially in the 3rd year. One day placements each week would allow for theory gained that week to be put into practice. More opportunities to collect practical resources - ideas for different areas of the curriculum.
>
> The chance to be put in varied institutions. More encouragement to have teaching practice in the harder areas of work.
>
> Teaching practices should have allowed us more time to teach and given us less written work - some was "for the sake of it".
>
> Having sections in both childcare centres and kindergartens, and then being able to specialise in field of choice, I would have liked to have collated more resources and ideas when teaching.

There was also some criticism of the overall planning of the college course, partly because it was felt that the course "was planned a year at a time". This led to time wasted and repetition. A few mature students felt there was not sufficient flexibility to take account of a student's prior experience, and students also taking university courses thought the college and university courses were not sufficiently co-ordinated. First-year teachers who had some knowledge of courses at other colleges wondered if better links between the colleges would allow for more sharing of ideas.

It was mentioned earlier that some students from Palmerston North had been led to believe that their training would prepare them for work with children from 0-8 years, and were disappointed when this turned out not to be the case. In their suggestions for ways the course could be improved, students once again said they thought the course should train students for this wider age range. There were also those who felt that the course focused most on 3- to 4-year-old children, with insufficient time devoted to infants and toddlers.

The content of the course could be improved in the view of some first-year teachers. Those who thought this was so usually referred to more emphasis being placed on preparing students for the administration of early childhood centres, as well as more helping with planning and evaluation of programmes. A few first-year teachers also thought there should have been more emphasis during training on political and social issues, including the politics of early childhood. Others also said there was a need for more emphasis on biculturalism and issues related to the Treaty of Waitangi.

## Conclusion

This paper is based on the experiences of students in the 6 colleges of education who are training to work in early childhood centres. Students in 2 of the colleges began their training in 1988 but others did not do so until 1990. It is too soon to draw conclusions from our data which are as yet incomplete, but certain trends have emerged. The courses are designed to prepare students for work in a range of early childhood services, but it is clear that the majority of students beginning training favour working in kindergartens. However, with some variation between colleges, the training courses are giving students an opportunity to experience a wider range of services than those with which they were previously familiar; this is encouraging students to think more sympathetically about working in services other than kindergartens.

Overall, students appear to be committed to work in early childhood and believe that their training is preparing them well for their chosen vocation. They are appreciative of the skills they have developed in human relations and communication, as well as those focused more directly on early childhood programmes and child development. Most would like more practical work included in the course.

Of the students who have completed their training, a high proportion are working in early childhood centres, most in the service of their first choice, and most expressed a high level of satisfaction with their job.

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# THE REFORM OF EARLY CHILDHOOD TEACHER EDUCATION IN AUSTRALIA

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## Introduction

In Australia, preservice early childhood teacher education has always been the handmaiden of primary and secondary teacher education. This has been compounded recently with recommendations for major restructuring within teacher education. To begin, this paper backgrounds briefly the range of reforms that have been suggested for teacher education. The discussion will then highlight the neglect of early childhood teacher education in the debate about these reforms. It will be argued that this lack of recognition should not be seen as merely an oversight by policy makers, but as a deliberate attempt to promote and, by political fiat, to enforce a new common sense view about early childhood teacher education in Australia.

## The Reform of Teacher Education in Australia

Over the past two years, the clearest statements concerning the rationalisation, restructuring and reform of teacher education in Australia have come from several sources: Dr Gregor Ramsey, the former Chairman of the National Board of Education, Employment and Training (NBEET); the 1989 Schools Council report on Teacher Quality; the 1989 Higher Education Council Discussion Paper on Course Length and Nomenclature; the 1990 Australian Education Council's (AEC) report of the Working Party on Teacher Education; and a 1991 Schools Council Discussion Paper on Early Childhood Teacher Education in Australian Schools. Each of these sources deserves brief consideration.

***Ramsey and NBEET.*** Ramsey's (1988, 1990) view, which has been described as instrumentalist, is that tertiary education is no longer seen as some interactive whole serving somewhat idealistic ends, but rather as a pragmatic engine of economic development (see also, Dawkins, 1990). Such an approach, says Ramsey, favours a re-organisation of education into compulsory and post-compulsory sectors. He then suggests that:

> . . . the implication of this kind of thinking for teacher education surely is to question the old teacher preparation categories of early childhood/primary/secondary/TAFE. (p. 55)

Ramsey advocates what he refers to as a more flexible approach to teacher education based on the principle that teachers should be prepared to work with individuals in any two of the adjacent age levels listed in Table 1.

Ramsey also issues a warning that restructuring of teacher education programs in Australia is inevitable and that those involved in teacher education must come to take what he considers to be a more realistic view of the tasks of a teacher who is teaching in the pre-compulsory, compulsory or the post-compulsory years. Moreover, he asserts - as others have done in previous decades (see Barcan, 1985) - that since the rate of growth in teacher education is likely to be low, the issue of quality can now come to the fore.

Table 1: Ramsey's Categorisation of the Australian Education System

| Age Level | Age | Sector | Categorisation |
|---|---|---|---|
| 1 | 0 - 5 | Early Childhood | Pre-compulsory Education |
| 2<br>3<br>4 | 5 - 8<br>8 - 12<br>12 - 15 | Junior Primary<br>Senior Primary<br>Junior Secondary | Compulsory Education |
| 5<br>6 | 15-18<br>18+ | Senior Secondary<br>Adult (Tertiary | Post-compulsory Education |

***1989 Schools Council.*** In addressing different issues from those raised by Ramsey, the Schools Council report on Teacher Quality highlights what it considers to be the future direction of teacher education in Australia. *Inter alia*, the report recommends:

(a) Four-year training must become the necessary minimum qualification for the great majority of teachers (p. 18).

(b) Teacher education must abandon its technocratic and utilitarian approach and move towards a more reflective orientation (p. 19).

(c) Practice teaching programs should pay greater attention to the sequencing, context and duration of the practicum (p. 19).

(d) Teacher training institutions should take increasing responsibility for the induction of new teachers (p. 26) and should consider internship models of initial teacher preparation (p. 27) and institute further programs for inservice education and training (INSET) (pp. 30-38).

(e) Giving priority in funding to the training of teachers for groups with special needs, such as Aboriginal children and students in rural and isolated areas (p. 44).

***Higher Education Council.*** The release of the above proposals also coincided with the publication of recommendations by The Higher Education Council about Course Length and Nomenclature. It suggested the immediate adoption of a three-year degree as the initial award for primary and early childhood teacher education. The Council was adamant that a four-year preservice degree would involve a substantial growth in expenditure which it sees as unwarranted.

The Higher Education Council offered a simple solution to the problem of nomenclature by recommending that a Diploma of Teaching became a Bachelor of Teaching with the option for a further honours year or for a graduate diploma in an area of specialisation.

***Australian Education Council.*** Another discussion paper of significance to the reform of teacher education in Australia is that from the AEC's Working Party on Teacher Education (AEC, 1990). 'There is no one best way to prepare teachers', cautions the AEC Working Party. It then proposes a preferred teacher education model which it avers will overcome the rigidities of present practices and will lead the way forward - a brave prediction, if in fact we are to believe there is no one best system.

The AEC model of teacher education involves a two-stage process. First, a three year, seven semester program to develop the students' general education in areas as diverse as language and science, mathematics and expressive arts and sociology and health education. Also to be included in the program are those essentials (e.g. study of school curriculum) that enable a person to be appointed as a sound beginning practitioner. The preferred nomenclature for the award is Bachelor of Arts (Teaching) with the possibility for Honours after an additional year of study.

The second stage also involves a degree program but in tandem with a period of professional experience. The BA (Teaching) graduate would be expected to take up an appointment as an 'associate teacher' (i.e., an intern) for a period of two years. During this time, salary and related benefits would be paid proportionately to the fraction of the teaching load carried. Supervision would be undertaken by an experienced teacher designated with specific responsibilities for teacher development.

Over the two years, the neophyte teacher would also pursue studies for a second degree. These studies would provide 'for deeper and more analytical reading into the mainstream educational studies - educational psychology, educational measurement and assessment, contemporary issues in educational thought and practice'. Study for the degree would be part-time, either on-campus or externally. Success as an associate (however determined) and with academic studies would culminate in the award of a post-graduate Bachelor of Education degree. Only after completing both academic degrees and the associateship would a person be granted unconditional recognition as a teacher (i.e., registration).

***1991 Schools Council Discussion Paper: Early Childhood in Australian Schools.*** The Australian Early Childhood Association was commissioned by the Schools Council to prepare this discussion paper. It has been sent to 'key early childhood professionals as well as professional bodies in the field' for comment. The paper's focus is the first years of school from an early childhood perspective. The scope of the discussion is comprehensive including working effectively with 5-8 year olds, appropriate preparation and further training of teachers, the nexus between these years of schooling and those which precede and follow them, partnership with parents and wider community, and accountability of school programs.

The paper's summary and conclusions assert that programs for 5-8 year olds should be developmentally appropriate and taught by early childhood teachers. Some concern is expressed about the K-6 organizational structure in State Departments of Education across Australia, and the paper suggests the need for preferential employment of appropriately trained early childhood teachers. The second proposal in the paper is that early childhood teacher education courses should be 'largely separate from primary and secondary' courses and 'that early childhood preparation needs to be more specific than 0-8' (p. 47). Optimum arrangements would provide for some common structure in a 0-8 course plus a requirement for students to specialise in one of three areas: 0-3, 3-5, or 5-8. The paper cites U.S. policy as informing this proposal. Institutions too small for such a course structure should either 'collaborate with larger ones' or be rationalized as providers.

## Contesting the Proposals for Reform

None of the advocates for teacher education reform in Australia nor any of the reports mentioned above has escaped criticism, although very little of criticism *per se* has come from the community of early childhood educators. And yet, of all the sectors of teacher education, it is early childhood education which has been most neglected in the considerations for reform, and for this reason alone the proposals should be contested.

The 1989 Schools Council's report, for instance, did mention early childhood teacher education but only in the context of the move from three to four-year programs. The Council pointed out that with an average of 16,000 students entering primary and early childhood teacher training each year, and 15,000 completing third year, the annual recurrent cost for an additional year would be $105 million, exclusive of the capital expenditure that might be required by institutions. The Council also suggested employers' costs could be increased with higher starting salaries. Thus, while the Council did concede that sooner or later four-year training would become necessary, it tacitly opted for three-year training as the norm.

These proposals to retain three-year preservice primary and early childhood teacher education as the norm, and to upgrade the award to a Bachelor of Teaching, can be contested on several grounds. For instance, primary and early childhood teacher education programs in Australia had been moving towards four-year training for a number of years and this move has continually been reinforced by recommendations from the plethora of enquiries into teacher education. Moreover, the now well-established and popular Bachelor of Education 'upgrading' program for practising primary and early childhood teachers is likely to be a casualty of the proposals for a three-year degree if they were implemented. Thus, an important inservice teacher education provision would be lost of a three-year Bachelor of Teaching degree became accepted and was seen as a terminating qualification.

No attempt was made in the 1989 Schools Council's report, or in the NBEET proposals on course length and nomenclature, to unlock what was assumed to be a nexus between early childhood and primary teacher education. Furthermore, little analysis was made of the differences in the workforce profile of those employed in the early childhood education compared with those employed in other education sectors. And yet, there are significant differences reflected in the supply and demand of early childhood educators, in the industrial awards governing their employment and in the diversity of areas in which they are employed. Research on staff turnover in child care services reinforces concerns about the level of workforce participation and the status of graduates employed in these services (Community Child Care, 1990; National Institute of Labour Studies, 1991; Early Childhood Teacher Supply & Demand Survey application, 1991). Regardless of the methodology involved in different studies, they all raise issues pertinent to the distinctive differences between early childhood workplaces and those in which primary teacher education graduates work.

More significantly, it is now becoming the norm for children in the year before school entry to have access to a preschool, and in some States access extends to children in the two years before school begins. Increased Commonwealth funding of children's services has also seen increased pressure to privatize and de-regulate, e.g., the provision of fee relief to private services (Brennan, 1988). The Functional Review of Child Care funding and administration in Australia makes its initial report this month. Ostensibly concerned about duplication and improvement of services to users, the Review will make political recommendations about the administration of various services by State and/or Commonwealth governments. These policy debates have significant implications for the education and employment of early childhood personnel, but rate little mention in teacher education reform documents.

Indeed, the AEC report does nothing to rectify the appalling lack of consideration given to early childhood teacher education. And yet, for most (except early childhood educators), the AEC proposals for teacher education reform have proved to be seductive. A five-year package incorporating a substantial practicum component through the associateship was seen to be appealing to those who have opposed the idea of a three-year terminating qualification in teacher education. Likewise, strengthening the relationship between universities and schools via an associateship scheme, while not a new concept, was seen to have its merits.

Nevertheless, the report's lack of recognition of the distinctive nature and problems of early childhood teacher education and of the diversity in requirements throughout Australia for employment of early childhood graduates cannot be excused. Indeed, the AEC report is alienating to those working in early childhood education. This is evident in the repeated references to schools and school systems - terminology which is usually not used by those involved in early childhood education.

At first glance, all of this might have appeared as simply an oversight of the AEC Working Party. However, the Working Party did nothing to correct such an 'oversight' in their Supplementary Report (1990). Indeed, it exacerbates the problem and almost completely ignores early childhood teacher education. For instance, much of the discourse of the Supplementary Report still uses the discourse associated with schools:

> . . . the preservice course should therefore contain such specific components related to teaching as will enable the graduate to enter a school on a provisional basis [and] to manage . . . classes of students. (p. 8)

Vocal representations from early childhood teacher educators and the employers of their graduates have stressed the inappropriateness of current plans to shift practicum funding to the employers. According to these new arrangements the supervision of practice teachers will soon be part of the normal duties of Advanced Skills Teachers. The fact that many early childhood employers neither want nor can afford to utilize this funding is not acknowledged by the Commonwealth architects of this innovation in practicum arrangements.

What does this lack of recognition of the importance of early childhood teacher education demonstrate? Sadly, it reinforces the view that early childhood teacher education in Australia still continues to be perceived as the least powerful and the most insignificant sector of the teacher education system. Prominent leaders in early childhood teacher education have always conceded that there are serious problems. Briggs (1984), for instance, after surveying Australian teacher education institutions in 1980 and then again in 1984, concluded that:

> . . . early childhood educators have all but lost control of the structure, and, in some cases, even the content of training for their own profession. (p. 12)

These are strong sentiments which suggest that little may have changed over the past decade. We may now be witnessing the demise of the territorial rights for the training of those who work with young children. Several years ago, Brennan and O'Donnell (1986) pointed out that the claiming of this territory was fraught with 'hostility and ridicule from various quarters' and by the common perception that working with young children is something that 'any woman can do'. Additional to this have been the difficulties of defending a philosophical and ideological position which has come to be a trademark for early childhood teacher education in Australia, namely that:

> . . . training courses which prepare students to work with children aged 0-8 years (the broad definition of 'early childhood education') should be separate from programs which train teachers to work with older children within formal school systems . . . (Brennan & O'Donnell, 1986, p. 96)

If anything, the recent push towards restructuring and reform of teacher education in Australia has blurred, not clarified, the philosophical and ideological position to which Brennan and O'Donnell refer, and has considerably weakened the territorial rights surrounding early childhood teacher education. Large amalgamated Faculties of Education may provide a valid 'testing ground' for the values shared by the early childhood field, but the experience of many EC course coordinators has been that of a disappearing operational base.

The 1991 Schools Council discussion paper stakes a claim for specialized early childhood programs in the first years of school taught by teachers with early childhood qualifications. This conclusion of the paper forges a wedge into the community of early childhood educators in Australia, many of whom have fought long and hard for the 0 to 8 year focus. Manufacturing a consensus about 'Minimum Early Childhood Course Content' and 'more specific than 0-8' early childhood education clearly serves the interests of some involved in the current discussions.

## The New Common Sense View about Early Childhood Teacher Education

What, then, are the implications for those institutions currently reviewing their early childhood courses? One immediate implication is that program development in early childhood teacher education is now much less likely to be influenced by empirical research results, philosophical literature or argument about the content and organisation of knowledge. Instead, it will increasingly become a servant of political considerations such as employment requirements for early childhood teachers, student enrolment predictions and the prevailing climate in higher education.

Another implication, also political in orientation, concerns the fiscal importance of teacher education. The costs and economic benefits of 'training' teachers has now come to be seen within the broader context of restructuring the Australian economy. All recent reports on teacher education have not disguised the fact that teacher education serves an important role as Australia moves from an industrial to post-industrial economy. Early childhood services, particularly long day care centres, employ a large number of graduates from Early Childhood courses. The increased number of centres and reviews of the funding and administration of these services attest to their importance in government economic policy.

Quite literally all the 'reviews' are not yet in. But the reform of early childhood teacher education and reviews of the EC workplace must suggest forces at work to systematically restructure the rationale for early childhood services in Australia, and the work and training of those who provide these services. Children's services are a part of a labour market strategy to enable women to enter paid employment. There are very powerful forces at work to rationalize the costs of staffing this strategy.

1. It is naive and simplistic to suggest that the key players in the reform of teacher education in Australia are apolitical and are really only acting in the interests of Australia.
2. Specific ideological and political agendas are the driving force for reform and these agendas reflect the views of the New Right.
3. There is evidence to indicate that early childhood teacher education has been abandoned in considerations and debate about reform and that this is not unintentional.
4. The solutions to the problems that now beset early childhood teacher education do not reside in consensus being sought on the preferred pattern of early childhood teacher education or the core components of a program. These practical strategies simply disguise the necessity for effective, political action on the part of the community of early childhood educators.
5. If the community of early childhood educators does not act swiftly to politicise the plight of early childhood teacher education, then it can be guaranteed that the decisions that are ultimately made to reform teacher education in Australia will not be in the real interests of early childhood education.

## Concluding Remarks

One of the aims of this paper has been to draw attention to the lack of recognition early childhood teacher education is receiving in recent recommendations for the reform of teacher education in Australia. Already there is evidence that these recommendations are beginning to shape the perceptions, cognitions and preferences of some teacher educators in such a way that they can see or imagine few alternatives. . . . Ironically, while we and other teacher educators are adamant that our goal is always to develop teacher education programs that would result in competent professional early childhood teachers who recognise the hidden biases of educational policies and practices, we are so occupied with the welter of practical considerations that we are often guilty of mistaking the issues most in need of our limited individual energies, but quite considerable concerted action.

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# THE EMERGENT PROFESSION

ANN VEALE

The theme of this conference, on the impact of change, has provided us with the opportunity for some guided reflection and some reflections-in-action about changes which have occurred and are progress towards a cohesive professional standing. In this paper, I propose to discuss some recent changes which can be construed as a pattern of events which taken together form a construction. To support my argument I will draw on professional activities such as the development of the code of ethics: the transitions of the training institutions into Universities; the development of the degree courses for teachers and for care givers; the availability of recent Australasian publications for tertiary teaching. Finally, I plan to review some of the literature that recognise the contributions that communities of practitioners make to what Nelson Goodmam called "World making" (p 36, 1978). I will also cite the theory that professionalism in Education is a state of mind and that the title has to be earned.

The development of a code of ethics by the Australian Early Childhood Profession has been a collaborative professional project that has challenged the participants to considerable debate and dialogue. It has also stimulated a historical analysis of the changing patterns of views as expressed in Early Childhood Journals 1960-1990 (Ashby, 1991). In the background to these activities, the education and training of early childhood practitioners has been caught up in the maelstrom of changes in tertiary education that could almost be classed as revolutionary.

To make this account a more genuinely personal reflective statement, I propose to present some events in narrative form, and then to theorise about the significance towards the end of the paper. At the start of this year, our tertiary institutions became a part of a newly formed University, the result of an arranged marriage between several campuses of a former College of Advanced Education and the South Australian Institute of Technology. Overnight our courses became University credentials through newly accredited course programs.

In the ensuing months two senior early childhood professionals have been promoted to the status of Associate Professor. This belated recognition of the status and national and international contribution of our professional colleagues across Australia by independent University promotion committees does collectively enhance the image and the degree of academic standing of early childhood care and education.

At the same time, intending students who have the prerequisite academic credentials are presented with career choices. They have the choice of applying for entry to a three year Bachelor of Teaching (Early Childhood Education) or alternatively a Bachelor of Social Science (Human Services : Child care). A fourth year pre-service degree of Bachelor of Education (Early Childhood Education) is available for intending teachers and the equivalent in-service degree is available for experienced teachers. While it would seem that there still exists a separation between the preparation of teachers and that of child care professionals that is not strictly accurate. Teacher education graduates have been enthusiastically seeking work in child care centres even before graduation and students with child care certificates receive credit if they transfer to the Bachelor of Teaching. The data collection of recent graduate employment patterns has been made complicated because of the multiple contracts which often mark the early employment history of graduates. Yet our figures suggest that up to twenty percent of graduating teachers accept employment in child care centres. While there remains two separate main career tracks for early childhood professionals, there is some possibility for cross over between the two degrees and students are in composite groupings for elective units. The two strands are therefore meeting and integrating together in a highly desirable way.

The next change that I wish to document lies in the greatly enhanced availability of recently published Australasian textbooks and Journals. When Ashby and Boulton-Lewis reviewed the most commonly used textbooks in Early Childhood programs in 1985 (Australian Journal of Early Childhood Vol 10 No 1) the six texts selected for that analysis were all from the USA. Now students can be exposed to recent textbooks from Australasia as well as from a range of international publications and have access to current research developments through the Australian Journal of Early Childhood and other referreed international Journals. While the professional knowledge base has been expanding so also has student access to this knowledge base become increasingly available through electronic as well as print media. This in turn stimulates students in higher degree courses to focus their research skills on highly relevant and salient contemporary topics.

So far I have been thinking reflectively about changes that have already taken place as if the change cycle were already completed. In many of the contemporary social issues the change dynamic evolves from changing social roles and conditions. The recent schools councils publications on 'Australia's Teachers: an Agenda for the next decade' recognises the changed situation with regard to schools. The report says 'it should be noted that teachers have also taken larger socio-political responsibilities on themselves over the past two decades ......' (p28) Later it is said "the compass of teachers' work has been unquestionably expanded, and a case can be mounted that it is being performed increasingly professionally (p29). Whereas teaching has a long and honourable tradition, care giving as a profession is much more recent. My reflection cause me to hypothesis that early childhood professionals at the 'front line' because they are close to families who are in the process of change. From the intimate and trusting relationship between parent and care giver/teacher, can develop the need for the professional to act as an advocate for a child or family, and a facilitator for assisting with putting those in need in touch with a wider network of community support agents. These roles of social responsibility may have placed staff in positions of divided loyalties which the ethical documents may help to reduce the tensions and clarify priorities.

In her excellent analysis of the roles of early childhood teachers Saracho (1984) analyses the roles and knowledge bases, skills and attitudes, that contribute to the effective rendering of the teacher's role. Give or take some of the debate over the relative influences of one role over another, it does reveal some of the previously hidden facets of teachers' work. Even teachers themselves may scarcely be aware of theoretical foundation of the principles they espouse.

Schon is the theorist who seems to be most able to explain the process whereby a community of practitioners can adopt a constructionist view of the reality and emerge as advocates and spokes-persons for their clients. Schon (1990 p33) says "Practitioners of a profession differ from one another, of course, in their sub-specialities, the particular experiences and perspective they bring to their work, and their styles of operation. But they also share a common body of explicit, more or less systematically organised professional knowledge and ..... an appreciative system - the set of values, preferences, and norms in terms of which they make sense of practice situations, formulate goals and directions for actions, and determine what constitutes acceptable professional conduct'"

One of the imperceptible changes that has become apparent in recent years has seen care givers and teachers working together in supportive relationships with other professionals. As increasing numbers of early childhood teacher education graduates have sought employment in child care programs they have found increased options for employment a rewarding teamwork situation. Following practicum placements in child care centres many student teachers find that they prefer the supportive framework of teaching in child care centres to that of the isolation of school class rooms or the pressure of large pre-school groups. They find that the interpersonal structure of child care centres are more fulfilling work situations and there are positions available. An additional benefit is the multi-professional possibilities of working with nurses, social workers and care givers.

The curriculum of child care givers has adopted a framework of social justice policies and life-time social issues. Child care centres have also been leaders in taking up health issues such as dietary guidelines. Many centres have developed policies of no salt in cooking and little or no sugar added for sweetening. Although many centres provide children with a hot dinner in the middle of the day, there is a trend towards vegetarian meals in preference to more traditional forms. of meat based meals. Many centres also adopt policies of non-violence approaches to solving conflict and towards long term goals of peace education. The emotional goals of children establishing a positive self-concept is often a fundamental priority. The curriculum priorities rely less on cognitive objectives than on social and emotional priorities.

The early childhood field has shown consistent initiative in providing a range of program types to suit the changing needs of families and children. Amongst these generic program types that have emerged are before and after school care vacation care. These programs may be centre based or school based depending on the school
facilities. More recently we have seen emergence of 24 hour day care programs and work based child care programs. At the same time traditional preschools have been providing for some occasional care and full day care when needed. It is rare to find a preschool that does not have some children present for lunch on any day of the week. When combined with the facilities offered by family day care there is impressive flexibility available to families seeking childhood programs or support for their families. Integration of children with special needs is a policy in urban centres.

Unassuming professional early childhood teachers and workers have been bringing past experience and mature policies to bear on the unique situation in practical experience. If we accept the criteria of Clamp (1990) that professionalism is a state of mind and that the title is earned by an individual, we have only to look at the conditions that he outlines to appreciate that the early childhood professional has emerged. Clamp suggests that one earns the designation "to integrity, commitment, trust, and honest hard work". No parent would wish to trust their child to professionals who do not exhibit the above characteristics. Clamp also attributes the importance to "good old fashioned know-how" which is often glorified these days by the tile of competency. Clamp leaves no room for doubt that he does not mean the minimum capability but rather "those who show genuine pride in giving the best that can be given no matter what the degree of difficulty or the constraints imposed."

The second criteria listed by Clamp is integrity. The characteristics of a professional is that they "act in an unbiased, honest way ever mindful of giving value for the customer's money ...." The team of care givers needs to be able to trust their colleagues without question and reciprocate trust in return.

The third criteria is reliability. The commitment to staff, children and family remains constant with little or no fluctuation despite adverse circumstances.

The fourth criteria must be demonstrated in evidence of genuine caring or in his words "empathic humanism". The caring professional must adopt a non-judgemental approach to all clients both adult or children. In a professional situation there are codes of conduct that must be observed which are 'self-standardising, self-disciplining and self-governing' Despite low status, a poor salary scale and until recently deprived of a career ladder of qualifications, early childhood professionals have maintained their sense of perspective regardless of the deprivation that would normally deter even a dedicated professional. If one accepts Clamp's definition that proffessionalism is a state of mind, that is manifest by a set of characteristics by which one identifies a group of people engaged in a vocational calling, then one must accept that the early childhood profession is proving itself as a professional group in a changing community.

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# PARENTING EDUCATION IN AUSTRALIA: A STRUCTURAL PERSPECTIVE

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## Introduction

> *The first child wasn't what I call a book-baby - she did everything the complete opposite and I found the book actually, to be really negative for me . . . it made me feel a total failure then - then I tried to make my child the book baby and she wasn't - I look back now and I should have ditched the book and put it on the compost - and gone ahead, perhaps follow her [the child] more . . .* (35-year-old mother)
>
> *At the moment, or the last couple of years, I've probably been very bad in respect to not being an effective parent . . . I think I've been sort of neglecting the kids time-wise . . . It's silly - I think work has played such a big part for so many years that if I'm not working on Saturday and doing something constructive on Sunday, I have a guilt complex.* (33-year-old father)
>
> *You don't have needs as a parent. They don't exist - at this stage.* (31-year-old mother)

These are the voices of some of the women and men who shared their experiences with me as part of the research I am currently undertaking in Melbourne on parenting education. The purpose of this paper is to discuss some aspects of the research.

The paper's central concern is to critically reflect on parenting education in its broader social structural context. The paper is informed by both a feminist perspective and a structural approach to practice, the latter emphasising the importance of endeavouring to change social structures where existing ones limit human functioning (Goldberg Wood & Middleman, 1989:28). These structures include dominant ideologies, which for the purposes of this paper are regarded as perspectives on life which favour the interests of certain groups, influencing people's thinking and behaviour and creating and maintaining standards of behaviour in groups who have been persuaded of their validity (Sargent, 1983:21).

In particular, the paper will explore the impact of 'the family' and its associated ideologies of motherhood and fatherhood, and parenting education's relationship to these. It will raise some issues emerging out of a survey conducted in the first stage of my research and will then consider some initial impressions from a case study of a small group of parents who took part in a parenting education program. Discussion of the implications will conclude the paper.

## 'The Family', Motherhood and Fatherhood

The nuclear family consisting of male breadwinner, home-based wife and dependent children was the most prevalent family form in the immediate post-war period in Australia. It is now only one of a great diversity of family and household forms, a significant contribution to this development being the changes in the social role of women who increasingly are moving into the paid workforce (McDonald, 1988:44; Kilmartin, 1990:58).

It would seem however, that the image of the nuclear family lives on as a powerful ideology of family life, an image to which many people still aspire. A key feature of this particular family form is its gendered division of labour. The modern nuclear family is also child-centred (Gilding, 1991:94), specialising in socialising and rearing children, and it has developed a distinct pattern of emotional intensity, privacy and family autonomy (Poster, 1978; Reiger, 1985; Shorter, 1975; Stone, 1979).

Couched within this particular image of family life is a notion of motherhood that stresses the responsibility of the biological mother for the rearing of her own children, especially during their early years. This notion or ideology of what is a 'good' mother exists across all social groups and ensures that mothers take the major responsibility for caring for children. Drawing on her Australian study of women in working- and middle-class suburbs, Betsy Wearing suggests that the core beliefs of the ideology include that motherhood and womanhood are intermeshed; that mothers should always be available to their children and that they should put their children's needs before their own. Motherhood therefore involves complete responsibility for one's own children and even though it is seen to be a low-status job, its intrinsic rewards outweigh the lack of financial and social recognition (1984:72).

In contrast, "fathers' main parenting responsibilities are considered to be outside the home, working to ensure the financial security and independence of the family group" (Pease & Wilson, 1991:57-8). According to Parke and Sawin (in Peace & Wilson, 1991) this view of fatherhood has assumed that fathers have less interest in nurturing and caring for infants and young children than their mothers and are less competent, with fewer abilities than mothers, for this task.

Whilst there has been some suggestion that men are perhaps becoming more involved in child rearing, there is little evidence that this is happening to any great extent. Kerreen Reiger (1991a:53-5) observes that recent research supports the argument that domestic division of labour remains largely traditional and that the norms of parenting have not changed greatly, with breadwinning and disciplinary responsibility still being very much part of the expectations of being a father, and day-to-day care and affection seen primarily as a mother's responsibility. This is supported by Don Edgar of the Australian Institute of Family Studies, who also reports little shift in the direction of men taking on more family responsibilities (1991:10). Several studies reported on at the Institute's Third Australian Family Research Conference in November 1989 indicated, to use Lyn Richards' words, 'the unexpected power of traditional values [regarding men's and women's roles] over the young and upwardly mobile' (*Family Matters*, 26, 1990:43).

## Critique of the Dominant Beliefs

Since the 1960s sociologists and historians working from within a critical tradition have drawn attention to the inequalities in family life which are masked by the dominant beliefs about the 'ideal' family and parenting.

These dominant beliefs increasingly came to be seen as socially and historically determined rather than as some sort of 'given', and also oppressive in their endeavour to meet the needs of patriarchy and industrial capitalism with its growing consumer orientation (Gittins, 1985; Morgan, 1985; Poster, 1978; Reiger, 1991b). Attention has been drawn to the ways in which the dominant beliefs have kept women and men shackled to particular views and behaviours, and especially have kept women in a subordinate and disadvantaged position vis-a-vis the majority of men.

Peter Leonard (1984:165-6) points out that the ideology of motherhood and of male economic responsibility maintains women in domestic labour and subordinate wage labour. He asserts that whilst the actual experience of motherhood can be a satisfying experience, especially because it is socially approved, it represents to the woman a deeply contradictory experience. Because the mother is expected to place the young child's needs first and her own last, she is placed in a subordinate position which, however, is perceived as necessary and even desirable. Leonard claims that this conflict may play an important part in inducing guilt in women. Thorne (1982:12) also highlights the arguments of a number of feminists that excessive guilt can be evoked through the intensive relationship between a mother and her child.

Wearing (1984:11) sees the responsibility for parenting, devolving as it does almost exclusively to mothers, as a major factor in the subordination and oppression of women. I agree with her contention that if the existing ideology is to be challenged, then one of the things that must occur is a change in male perceptions of child care and housework.

## Professional Experts and the Dominant Beliefs

Writers from within the critical tradition have also drawn attention to the part played by professionals in the adoption and fostering of these dominant beliefs. Reiger has chronicled in detail this phenomenon (1985, 1991a). In the early twentieth century, Australian women were seen as "the controllers of the quantity and quality of the Australian population, a task so important that [they] had to be supervised and regulated in the course of carrying out their 'national duty'" (1991a:47). The professional experts of the new middle-class, assisting and in conjunction with the state, took considerable interest in the process of child rearing in what Reiger terms 'reform attempts'.

In the 1920s and 30s new specialists in child rearing emerged in the form of infant welfare sisters and paediatricians followed soon after by kindergarten and child guidance professionals and other specialists. More recent developments have included the involvement of professionals and 'lay' experts in specialist training in parenting.

Themes that can be found in the messages of the professional experts include an emphasis on mothering and the rationalising and professionalising of motherhood (Reiger, 1991a:48-50). More recently this has involved a shift in the theories of child rearing away from the earlier emphasis on conformity and discipline to a more permissive approach to child rearing and an emphasis on personal expressiveness and individualism (Edgar, 1991:16).

With an emphasis on the child-centred family, child rearing was being stressed as a private parental responsibility with parents (mothers) increasingly responsible for the guidance of their children. An emphasis on the individualising and psychologising of problems through the influence of child development theory about the parent-child relationship and the significance of mothering saw an expectation of the mother as manager of the family's emotional wellbeing (Reiger, 1991a:47).

Reiger points out, however, the contradiction to be found in the reform attempts of the professional experts. In reinforcing the traditional construction of 'the family', the professionals at the same time were undermining the role of the mother by reducing it to the execution of 'rational and scientific' tasks along lines laid down by outside experts (1985:20).

The influence of the professional experts, then, in association with other social factors, has meant that parenting, and mothering in particular, has become more complicated. As Reiger (1991a) points out, suburban isolation and the breakdown of wider kin and community supports along with the pressures associated with child rearing in a consumer society have all contributed to increasing expectations of parents, particularly mothers, and an increased load of child rearing.

### Parenting Education Programs

Two important threads therefore emerge from the discussion. On the assumption that it is important to develop more flexible views of mothering and fathering, consideration needs to be given to whether parenting education operates to reinforce traditional views of parenting or to support changes to these views. In addition, if we are to ensure that parenting education is supportive to parents rather than undermining, we need to know more about parents' responses to parenting programs. The focus of this paper is primarily on the first point.

With these issues in mind, I undertook a survey of formal parenting education programs run in groups in and around Melbourne to obtain a general profile of parenting education. Results of the survey have been reported on elsewhere (Allan, 1989) and will not be provided in detail here. However, some particular issues of significance to this paper will be commented on.

The survey indicated that the theoretical derivations of the most commonly provided parenting programs were humanistic or eclectic, the latter incorporating a range of approaches which could be categorised as humanistic, behavioural, psychoanalytic and systems. These approaches can be characterised as fitting primarily within the functionalist school of thought. This emphasizes the order and stability of society which is deemed possible because of the supposed consensus on values throughout society, and is maintained through the socialisation of the majority so that they internalise the generally agreed upon norms and roles. The study of society tends to occur in isolation from historical, political and economic factors and social change is by definition seen to be dysfunctional (Sargent, 1983:80-1).

This contrasts with the critical school of thought from which the structural approach is derived. This school of thought assumes that society is held together by coercion based on the power of dominant groups and consists of people who struggle against each other in an attempt to organise society to serve their own interests and needs. In this approach, social change is seen as inevitable and has to be worked for in order to reverse the power arrangements of the status quo (Sargent, 1983:22).

The survey indicated, not surprisingly, that program participants are most often female, of Anglo-Saxon origin and middle-class. As noted in an earlier paper (Allan, 1989), it would appear that programs still focus on mothers, with fathers getting little attention in their parenting role through these programs.

This picture of the values and assumptions underpinning the programs and of the program participants raises interesting questions about whether the dominant beliefs about parenting are being reinforced (unwittingly or not) in the programs. Parenting programs that are based on a critical theoretical perspective and that also target fathers would, it is suggested, be more likely to cut across the traditional beliefs. There appeared to be few of these programs in the survey I conducted. The suggestion does raise a dilemma, however. If programs are directed to mothers, they may run the risk of merely reinforcing the stereotype. If they are targetted at fathers, there is the danger that they may be gender-neutral.

A case study was undertaken to explore in greater depth some of the issues emerging from the survey. Because of the frequency of use of the STEP program, I selected a group of ten parents who chose to do a STEP course which was conducted at a local kindergarten in a middle-class suburb of Melbourne.

The STEP program which is based on humanistic principles was developed in the USA in the 1970s to help parents relate more effectively to their children. It emphasises mutual respect between parent and child, cooperation, responsibility and self-reliance (Dinkmeyer & McKay, 1982). The program is divided into weekly topics with detailed instructions for facilitators, and these were followed fairly closely from week to week in the course run at the kindergarten.

I joined the group in an observer role during the sessions and did indepth interviews with the group facilitators, the parent participants and their non-participant partners.

The information about to be presented will focus on some general impressions to date that are of interest here. These concern the mothers' and fathers' experience of parenting, and structural context issues - in particular the significance of gender-neutral assumptions and the philosophies of family autonomy and the 'psychologising' or individualising of parents' concerns. Because of the use of the case study method it is not possible to generalise from the experiences of this group of parents, but issues for further speculation and consideration are raised.

***Experiences of Parenting.*** Overall, the experience of the women and men in the case study fits with the research findings outlined earlier in the paper that little change can be seen in the patterns of child rearing. A fairly clear gendered division of labour existed for the parents, but some breakdown of traditional attitudes was apparent.

All men were the primary breadwinners, and whilst four mothers were full-time homemakers, the other three women worked in part-time paid jobs that mostly fitted with school hours or times when the father would be home from work (for example, evenings or weekends). Because of these work patterns, the fathers spent far less time than the mothers with their children.

On the other hand, some men had definite responsibilities for child care tasks that they shared in an interchangeable way with their partners, albeit within the constraints of their full-time jobs. There was also an awareness amongst some men of the need to spend more time with their children as seen, for example, in the quote at the beginning of this paper. It is encouraging to see fathers as well as mothers attending parenting classes, suggesting an attitude that parenting is shared responsibility.

Wearing's study (1984) on the ideology of motherhood shows that whilst some respondents were questioning or even overthrowing traditional beliefs about a 'good' mother, most had internalised the ideas. In terms of their work patterns and apparent acceptance of the division of labour involved, it would seem that parents in this study have internalised some of the dominant ideas, yet one of the themes in group discussions was the struggle of some mothers against the social pressures created by the stereotype of being a 'good' mother. However, contradictions are also evident, as group members also struggled with the discomfort created if a parent was not seen by others to be a 'good' parent.

***Structural Context Issues.*** The STEP program does not differentiate between mothering and fathering and the parents in the study tended not to differentiate either the expectations or actual tasks of mothers or fathers, despite the division of labour in their day-to-day lives. Thus gender-neutral language is problematic. Backett (in Morgan, 1985:200-2) notes the importance of gender differences within parenthood and the problems associated with the use of the terms 'parent' and 'parenting'. She urges us to go beyond the gender-neutral mask by treating motherhood and fatherhood separately, noting the apparent discrepancy between approximately egalitarian assumptions and the reality of the sexual division of labour within the home and between home and work.

It is suggested that by not acknowledging that mothering is the bulk of the work of child rearing nor allowing for much discussion of this issue, the program in this study masked the reality of the workload and the pressures felt by the mothers and fathers, but especially the mothers.

Whilst there was ample opportunity in the program for parents to discuss problems and pressures they were experiencing, there was limited acknowledgement of the part played by structural factors as external determinants of the situations experienced.

Factors that seem to have contributed to this include the continuing influence of the principle of family autonomy and privacy, and of the tendency towards 'psychologising' or individualising of problems.

Parents seemed to have a strong belief that parenting is a private responsibility and all demonstrated a strong sense of responsibility towards their children, not least through participation in the STEP program. This sense of responsibility is acknowledged as being both desirable and necessary (for example, see Edgar, 1988:1-7). However, Edgar (1988) draws our attention to 'the myth of personal and family self-sufficiency'. He argues that families, because they are not insulated from outside social pressures, are a public as well as a private matter and that support for their wellbeing should be shared, not left to private means alone.

With the focus in the STEP program on approaches to child rearing, techniques for communication and management of children's behaviour, it is not surprising that problems and issues raised by parents were defined and 'solved' in individualised ways. Ideas for dealing with issues usually located the responsibility for the problem directly within the individual's or family's control thus reinforcing family autonomy and privacy. Again our attention is drawn to the need to consider the possible links between day-to-day management problems and the broader structural context such as the relative isolation of families, and the actual load of child rearing with its intense emotional relationships, its limited social support and its plethora of advice from the experts.

## Ways Forward

The need to challenge the dominant beliefs about mothering and fathering has already been established and it seems that parenting education programs may be in a good position to do this. The paper has been focussing to date on some of the limitations in the STEP program but the case study showed that parents also expressed some satisfaction with approaches and skills that they learnt in the program. It is essential therefore to recognise the danger of simply replacing one set of ideologies with another.

In this final section I will give some concrete ideas on what an alternative approach might look like. The model of self-directed groupwork identified by Mullender and Ward (1985) seems to have much to offer as a way of overcoming the various concerns. This form of groupwork is based on a social structural view of the causes of day-to-day problems and is aimed primarily at achieving external change rather than on changing the attitudes or behaviour of group members themselves. It acknowledges that the various social networks and institutions of which we are all members in part help to create our attitudes, hopes and choices and that "intervention which does not take these into account becomes detached from the reality of people's lives and also misses an important area for achieving change" (Mullender & Ward, 1985:156). Emphasis is on starting with people's own life experiences and it is assumed that members lack power of some sort rather than skills or desirable personal qualities. Members are encouraged to question others' attitudes towards themselves, to be actively involved in decision-making and to challenge the prejudicial aspects of societal norms.

In this model, a redefinition of the notion of worker expertise occurs so that it becomes seen as the capacity to engage professionals and group members together in exchanging and generating the knowledge and skills to meet the issues of concern. Facilitators of such groups are required to be clear about their own values and to share these with the group. It is also essential that facilitators have the skills of critical questioning to enable group members to move from a personal to a structural change perspective. Through the questions 'what?', 'why?' and 'how?', the facilitator can move the group along: 'what' allows and helps the group to identify the issues in the group; 'why' helps the group to explore why those issues exist; and 'how' helps members to decide what actions they want to take.

By way of example, a hassle identified by most of the parents - both mothers and fathers - was that of not having enough time to meet their own needs and interests or those of their children. In the program I observed, suggested resolutions of this issue centred on individual skills and competencies, such as the use of 'I' messages.

Drawing on the self-directed model, an alternative approach to this issue of 'not enough time' would be to firstly acknowledge that this was an issue of concern to many in the group. The facilitator would then help the group to look at why there is not enough time. Critical questioning used at the group's pace will encourage parents to gradually make links between their own experiences and the external demands and expectations placed on them by society - for example, 'what sort of time do you need?', 'what other things are you doing with your time?', 'what might stop you from having more time?' and 'who says you need to spend time on these activities?'. These sorts of questions pave the way for parents to look more broadly and take into account factors such as stereotyped and unhelpful attitudes and beliefs, lack of child care, work-places unsympathetic to child rearing, inflexible shopping hours and so on. At the very least, this sort of orientation may help parents to move away from seeing the issue of 'not enough time' as one to which they must adapt and which will only be solved by individual skills and competencies.

In conclusion, parenting programs need to make clear their value base and the assumptions underlying the programs must be spelt out. There must be a move from gender-neutral assumptions and language, and the facilitator must be alert to opportunities to help parents make links between their own experiences as mothers and fathers and the social structural context that has helped shape these experiences. Above all, facilitators must have an open mind and be accepting of all family types and patterns of mothering and fathering. The implementation of principles such as these will help towards the easing of the shackles placed on mothers in particular, and fathers, by the dominant beliefs about motherhood and fatherhood.

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# PARENTS AS PROFESSIONALS

Liz Depree and Pauline Easterbrook,
New Zealand Playcentre Federation

Parents as professionals - what do we mean? How does this relate to parents in Playcentre?

We believe Playcentre parents are professionals. Together they share the responsibility for establishing, organising, supervising and maintaining their Playcentres.

From the small beginnings in 1941, with 2-3 Playcentres by the end of that year, the New Zealand Playcentre Federation now caters for 17,500 families, with 23,000 children in the birth to school-age range, in 613 parent cooperative centres. As the number of centres grew and spread around the country, so too did the parent education courses, supporting our philosophy of 'grow your own supervisor'. Our centres are grouped for parent education, coordination and support into 29 regional Associations. There is a national elected committee of 8 with responsibility for carrying out the wishes of the Annual Conference and about 20 other elected officers responsible for coordination and support in the areas of Education and Training, Equipment, Property, Public Relations and Publications.

Playcentres are a family concept - interaction is the core of the learning. We recognise that children reach their full potential more successfully when parents understand their development and participate in the learning process. As a result of work in Playcentre, the parent enriches family living; as a consequence of the experience of parenthood, the parents enrich the early childhood education of children. The Playcentre movement sees its function as having two aspects, each dependent on the other:

- to operate a worthwhile play programme with small groups of young children for definite periods each week;
- to provide the means through which parents may gain for themselves more understanding of their role as parents.

Playcentre sessions provide approved equipment, indoor and outdoor play, developmentally appropriate play programmes; child-initiated play, 2½ hour sessions up to 5 times a week, supervision by parents - trained or in training - adult/child ratio of at least 1:5/6. Parent Education Courses are offered to parents to help them understand their own children and the concerns they may have as parents.

All parents participate in the introductory stage, formally and informally, as they join a centre. Many continue through the various other stages as they become interested in how children learn and grow. The unique features of the courses are: they are field-based, they are accessible, cost-effective and delivered in flexible ways so that parents can step on and step off to suit individual needs and family commitments.

The benefits of learning the Playcentre way are many. Parents working in the sessions learn more about the importance of a developmentally appropriate programme, about how to interact with the children in child-initiated play, and about how to be more effective parents. Much of what is learnt is through casual observation and modelling, with the chance to build on these in more formal situations. Children have the chance to benefit from their parents being actively involved with their early childhood experiences in an environment that is designed to stimulate learning through play. Part of the support and ongoing learning in Playcentre is in helping people to learn from their experiences, encouraging them to build on what they know, and accepting each individual's starting point. This inevitably means there are high points and low points, but also that there is always the possibility for personal and group growth.

A National Education Committee provides inservice training, updates informational and organises regular national meetings and training days for regional trainers. These regional trainers are responsible for training their people and administering Playcentre Education in their own region. Regional records are kept for all those who undertake courses. Our annual training statistics show the tremendous number of parents participating at levels of training.

Playcentre is a career - most people join Playcentre for their children. However, the parent education they receive, both formally and informally, strengthens them as parents, benefitting families and the wider community. Parents are professionals - in Playcentre we build on the skills and knowledge parents bring when they join, and provide opportunities to develop that professionalism.

# THE INVOLVEMENT OF FATHERS IN SESSIONAL EARLY CHILDHOOD CENTRES

Pauline Easterbrook,
New Zealand Playcentre Federation

This research was undertaken in Term 3 1990 as a Special Topic Investigation for the Massey Certificate in Early Childhood Education.

> "What is the nature of participation by fathers in sessional Early Childhood Centres? Do fathers of children attending these centres want to participate differently?"

In these days of high unemployment, more mothers working in paid employment and more fathers in primary care-giver roles, there must be many more fathers available to attend Early Childhood Centres with their children. There is a lot of talk about parent education, parent involvement, consultation with parents, yet this education, involvement and consultation is primarily with mothers. The recent changes in the management of Early Childhood Centres emphasise the need to consult with parents/whanau during the preparation of the Charter, to develop procedures for sharing information with parents and for involving parents/whanau in policy, curriculum and parent education matters. Parents means mothers and fathers, yet very few fathers are involved in Early Childhood Centres.

For a representational sample of sessional Early Childhood Centres, 3 Kindergartens and 3 Playcentres were chosen from varying areas within suburban Christchurch. The study was conducted in 3 distinct parts - observations, interviews and questionnaires.

Observations of the fathers in the 6 centres provided baseline information for the rest of the study. 2 observations were carried out in each centre, 4 weeks apart. Precoded observations were used to record specific behaviour at each session. The focus of each observation was to record the number of fathers present, the duration of their stay and what they actually did while they were there.

Interviews with the staff of each centre took place after the second observation. The purpose of each interview was to identify the methods employed by the staff to initiate contact with the fathers in their centres and to discover how that contact was implemented and maintained in the day-to-day running of the centres. The interviews were semi-structured and the same 6 questions were asked at each centre with the information recorded on tape.

The questionnaires for the fathers were structured from the data collected from the observations and the interviews. There were 20 questions involving Yes/No responses, multiple-choice answers and spaces for individual comments. A covering letter explained the purpose of the questionnaire. They were delivered to each centre early in October and centre staff ensured they were given directly to the fathers where possible or sent home via the mothers. They were collected from the centres 2 weeks later.

The observations highlighted my hypothesis that there are very few fathers at the centre sessions and, of those who are, most are involved in the bringing/collecting capacity. Most of those present stayed for a very short time only. The 4 fathers who did stay for longer periods were actively involved with children, equipment and other adults while at the Playcentres. The majority of the fathers present at all the 6 centres interacted with their own child only and several of the Kindergarten fathers observed what was happening without being involved. Most of the Playcentre fathers helped to set up equipment or pack away at the end of the session. There was interaction between the staff and the fathers and this was initiated by both staff and fathers at times. However, it was fleeting contact and mostly in the form of a greeting only.

All the staff assured me that the fathers were unable to participate in the sessions because of work commitments. Most of them were aware, however, that no real effort was being made to specifically encourage fathers at the Introductory level and all felt this was an important place to start. Family participation was encouraged at this time but once again this mostly reached the father via the mother. As all the staff definitely want to see more fathers involved, they realise they have some responsibility to help break down the barriers that do exist and make the fathers feel more a part of the centre environment. There are difficulties for the staff and the fathers, but each staff member felt some changes were possible. My observations showed some lost opportunities when fathers were present and little or no contact was made. This was particularly noticeable between fathers and other adults at the centres. Very few fathers were spoken to by mothers, yet many of the mothers were actively involved in some way or talking amongst themselves.

It was pleasing to see that 97% of the fathers had visited the centres, for a variety of reasons, although few had attended a centre meeting. Partners are an important source of information about happenings at the centres and newsletters appear to be a useful way of being kept informed. One centre had not held specific father sessions and this may account for the high number of fathers who have never attended such a session. Many fathers expressed interest in such events during evenings and weekends. It was reassuring to hear that 90% of the fathers feel comfortable at the centres, contrary to one of my original hypotheses. The friendly, relaxed atmosphere was the main reason for feeling that way. The reasons given by the few who did feel uncomfortable relate to the 'women's domain' and being unsure of what to do. Many fathers would like to be more involved and have opportunities to participate in the centre more fully.

The staff at all 6 centres should feel affirmed by the great range of positive comments about the centres. There is a high level of satisfaction amongst the fathers there and plenty of reinforcement for a job being well done. The negative comments raise points of concern. There appears to be a lack of understanding by some of the fathers about the philosophical base of the centres and this is something individual centres need to address. This study raises implications for people involved in Early Childhood Centres - parents and staff. Father/child sessions are appreciated and seen as worthwhile by most fathers. They may need to be held more frequently. Contact with fathers when they do visit the centres, for whatever reason, needs to be allowed for and encouraged, and mothers in the centres could be encouraged to become more involved in initiating this. Explanations of the centre philosophy, programme and specific ways fathers can become involved need to be spelt out directly to the fathers, and via newsletters, particularly at the introductory stage. With 57% of the fathers stating they would like to be more involved, the need is there. Some fathers are waiting to be asked.

What is the nature of participation by fathers in sessional Early Childhood Centres? It is minimal and is mainly concerned with bringing their children to the centre and/or collecting their children.

Do fathers of children attending these centres want to participate differently? Yes. More than half of the fathers who responded do want to be more involved in their children's early childhood education. The challenge is there for centre parents and staff.

# THE EARLY CHILDHOOD DEVELOPMENT UNIT
# SUPPORTING PARENTS IN A COMMUNITY DEVELOPMENT MODEL

Pam Kennedy
General Manager, Early Childhood Development Unit

At the end of August 1990 the Early Childhood Development Unit launched Te Roopu Maatua-Tautoko - its Parent Support Project.

We deliberately used the word project so that the processes used by the Unit staff to reach families not involved with any early childhood service, could be divided into 4 distinct phases of:

**CONSULTATION**

**DEVELOPMENT**

**IMPLEMENTATION** **AND**

**WITHDRAWAL**

Since that time we have been involved with 40 projects.

Some excerpts from our guidelines for anyone involved with these projects illustrates how they are meant to operate.

"Embarking on a community project to provide support and education to families of young children is not dissimilar from stepping out into the unknown. It is not possible to provide a never-fail recipe. Communities differ in their structure, processes, relationships, identity, and their perceived needs. At the same time communities have many different social, technological, environmental and political pressures impacting on them. There is no one way of establishing a parent support project. Each project will take on a life of its own tailoring itself to the particular characteristics of the community as long as power is placed with the community."

## BASIC PRINCIPLES OF PARENT SUPPORT PROJECTS

"It is important for the people initiating a parent support project to be clear about their motivation and their values in wanting to establish a project. The implicit idea behind a parent or family support project is that the families will benefit from intervention; so the role of project leaders is to facilitate intended effects. Who should decide what the intended effects ought to be?

What should be the content of a parent support project or programme? Who should it be aimed at?

Is it intended that the long range goal is to have an impact on the social setting? What differences will this impact make on what is happening already? Who will the change be for? Who else will be affected?"

"Possible Goals

- To enhance parents sense of self esteem and confidence in the parenting role.
- To empower parents to participate successfully in the development and education of their pre-school children.
- To assist parents to evolve community based support and education networks that provide opportunities for mutual support and growth."

"Planned Outcomes for Parents might include:

- Reduced isolation of young families.
- Development of community networks that support families with young children
- Increased self confidence about their role as parents as the primary educators of their children
- Increased participation in parent/child activities
- Enhanced positive experience within the parent/child relationship
- Increased understanding of how parents can be involved in encouraging their children's learning.
- Improved access to community networks
- Sense of community identity and information sharing within neighbourhoods

- Strategies for community development that is responsive to the needs of families with young children."

## COMMUNITY DEVELOPMENT

"It is expected that Early Childhood Development Unit Parent Support Projects will operate from a community development perspective.

Community development owes much to the philosophies of Paulo Freire and Saul Alinsky and is part of the movement away from professionals making decisions about what is good for those who are considered to be unfortunate. As an example even an international philanthropic organisation such as the Bernard van Leer Foundation has moved within its aims to operating in a more consultative and empowering way of community development.

Type of Approach:

1 The basic principle behind a community development approach is to develop an integrated community which will decide on its needs and how best to meet them. The community members are brought together to develop their skills, knowledge and resources. They become the agents of their own change and development. Concepts of empowerment, access to resources, co-operation and co-ordination, and leadership development are associated with community development approaches. The ECDU co-ordinator's role is that of catalyst, co-ordinator, stimulator of self help, recruiter of volunteers, teacher of skills, provider of support, facilitator of group development."

"Definition of Community:

Communities can be based on a geographic locality or a community of interest. The parents in a Parent Support project could be described as community of interest. However, others in the geographical community will have an interest in these families. In establishing a consultation process within a community, the Development Unit will need to consult with both groups. In order to implement a community development approach the Development Unit staff will need to ensure consultation with the geographic community focuses on 'how can we contact parents to find out what they would like?'"

*"The basic premise behind parent support projects is that parents are educators of their children and that empowering the parents of young children can have enduring positive effects on the children's educational and social outcomes."*

## HOW HAS ALL THIS WORKED OUT IN PRACTICE AND HOW IS AND SHOULD THE UNIT BE EVALUATING THIS WORK?

## REPORT ON EARLY CHILDHOOD DEVELOPMENT UNIT PARENT SUPPORT PROJECTS JULY 1991

1 There have been 40 projects up till 30 June 1991. As at the end of June 11 projects were in the consultation phase, 3 in the development phase, 19 in the implementation phase and 7 in the withdrawal phase.

2 Combinations of the following factors are common to all communities where Parent Support Projects have been or are being established:

- a lack of early childhood services;
- concern by school principals and staff about children starting school with no experience of an early childhood service;
- high unemployment;
- very young parents;
- a lack of transport;
- non-use of social services;
- non-use of health services;
- families unaware of existing early childhood services;
- lack of community facilities;

- families isolated from each other by distance, lack of public amenities and lack of parental self-confidence.

3 Seventeen of the 40 projects are in predominantly Maori communities and another four are involving Pacific Island families. One is in an area with a high proportion of Asian families.

4 Outcomes so far include:

- at least 61 public community meetings have discussed local needs;
- health workers are closely involved with all projects;
- over 6,000 newsletters, questionnaires and leaflets have been distributed to letterboxes, and via schools, early childhood services waiting lists and community groups;
- increased attendance at local early childhood services;
- liaison networks with other government agencies established in all 11 districts;
- Community Projects Support Groups established in 25 communities;
- Over 250 families with 400 children are currently being visited in their homes;
- More than 100 house meetings/discussion groups have started, involving nearly 1,000 people with 460 currently involved;
- 25 ongoing playgroups in homes have been established and 9 in community buildings;
- 36 sites for playgroups and other early childhood activities have been found and are now being used regularly by families;
- in the last 12 months over 2,000 families not involved in early childhood services have been reached. Approximately half of these are Maori families.

## MAORI FAMILIES

There are 6 Parent Support Projects which are specifically Maori in Tarawera, Wairoa, Awatapu, Wanganui, Cromwell and Tuatapere.

Children in these families are not involved with Te Kohanga Reo or any other early childhood education services.

The Parent Support Projects with Maori families include Marae-based parenting courses, church hall and home-based playgroups, and meetings in community houses and homes.

The way the projects are organised and operated has been developed from the needs of the local Maori families.

## BUT WHAT ACTUAL AFFECT HAS ALL THIS HAD ON PARENTS? HOW DO THEY FEEL ABOUT IT?

Feedback from parents involved in one Parent Support Project in a small rural, mainly Maori community with high unemployment and the nearest early childhood service 35 kms away, is as follows:

"A Parent Support Project empowers parents to make decisions for themselves and their children. It gives them choices about what they feel is important for their children and how they implement those choices and evaluate them".

Benefits to parents, from these parents points of view, have been:

- The frequency and length of meetings are decided by those directly involved.
- The regular opportunities to share ideas, discuss child development and other topics of interest.
- The development of friendships and support for each other.
- Reduction in the feeling of isolation felt in a rural community.
- Development of a community support system.
- Parents are more comfortable leaving their child/children.
- Parents are encouraged to further their knowledge in the area of child development.

- The opportunities to use ones skills and recognize the skills of others.
- Development of self esteem.
- Increased understanding of their child's development.
- Affirmation of the role parents play in being their child's first and most influential teacher.
- Working towards a common goal - fostering children's growth and learning.
- Learning alongside the children in the implementation of the principle of the Treaty of Waitangi - "that all children have the opportunity to learn about the dual cultural heritage of New Zealand".

The Parent Support Project is fully supported by the community.

The School has supported in the following ways:

- use of school swimming pool
- outlet for PSP news through school newsletter
- venue for public meetings
- lending of tables and chairs surplus to the schools requirements.

As a direct result of the Parent Support Project a group of women have:

- become a playgroup and are applying for funding this term.
- have requested information on child development e.g. "How children think".
- have formed a craft group and are presently negotiating to use the playgroup venue as a base for craft meetings/workshop.
- have requested to be included on the E.C.D.U. mailing list.
- have attended E.C.D.U. inservice training.

**HOWEVER, IT IS ALSO IMPORTANT TO PUT THIS WORK IN INTERNATIONAL, PHILOSOPHICAL AND SOCIAL POLICY FRAMEWORKS AND EVALUATE IT AGAINST WHAT IS HAPPENING ELSEWHERE.**

Bronfenbrenner (1979) defines the ecology of human development as the "scientific study of the progressive, mutual accommodation between the developing person and the changing properties of the immediate and broader contexts in which the person lives." Public policy constitutes one of these broader contexts. Central in an ecological perspective on human development is how do policies and practices affect the experience of those whom they are intended to serve?

While policy research is a thriving enterprise worldwide there have been few if any systematic studies of how policies explicitly or implicitly define the status of the families and children they are intended to serve, while according to Bronfenbrenner, parent support work worldwide, past and present, has tended to be based on a "deficit" model.

Bronfenbrenner & Weiss (1983), give an example of a major social agency in a large American city celebrating its first centennial in the early 1980s. For that occasion, the planners of the celebration did something original and rather daring: They reprinted the brochure that the agency had published in its first year of operation 100 years before. In its debut, the agency had left no mystery either about its own role or that of its clientele. Both were proudly emblazoned on the front cover:

**The Friend of the Sick**
**and Poor**

---

**the Worry of the Tramp**
**and Beggar**

Within its covers, the brochure expanded on these two themes. Here are some representative excerpts:

"We investigate the cases of all who are sent to us from out of the city, give them food to relieve their immediate wants, ask the railroads for tickets, and send them back to the place from which they came. . . .

TRAMPS, BEGGARS, AND LAZY PEOPLE hate the [agency] and condemn it for heartless treatment. It is one with the police force in making things unpleasant for them."

This is how such problems were approached 100 years ago. These were "encounters of the first kind." On the same occasion, the agency also distributed copies of its most recent brochure. Here are some excerpts:

"Services are available to all: the married and unmarried, couples, singles, youths living away from home, single-parents, the separated, the divorced, and widowed, all income levels and all races."

The rest of the booklet contains a series of paragraphs under such headings as Individual Counselling, Marriage and Relationship Counseling, Family Counselling, Parent-Child Counselling, Separation and Divorce Counselling, and so forth. These are "encounters of the second kind." They are clearly an improvement over their predecessors-less condescending, more sophisticated, more humane. But the basic operating principle remains the same: Those who have problems are to be helped by those who have needed resources; Lady Bountiful has merely yielded place to the trained professional.

This deficit model pervades all types of social services where to qualify for help, potential recipients must first prove that they and their families are inadequate so that they can be defined, and dealt with, as "problem children," or, better still for bureaucratic purposes, as "multi-problem families."

There also currently seems to be internationally, a widely shared belief that resources and services are being wasted on many who are not "truly needy," and that even those who are might be better served by removing the crutch of dependency, stimulating them to fend for themselves. It is not difficult to detect in this contemporary rhetoric a continuity, in substance and even in style, with the orientation so prominently displayed on the cover of the agency brochure published 100 years ago. It would appear that "encounters of the first kind" are experiencing something of a rebirth as they enter their second century.

## SO WHAT SHOULD WE BE DOING IN NEW ZEALAND?

We know that if the well-being of families and children is to be ensured, it is absolutely essential to develop and implement feasible alternatives to services and programmes based, explicitly or implicitly, on a deficit model.

What we don't need to do is get bogged down in developing a child and family policy for New Zealand. It would take a long time to get an agreed and workable definition of family in the first place.

What we need is Government agencies and practitioners being explicit about how they see their programmes and practices:

(1) defining the status of families and children;

(2) influencing families and other social institutions with responsibility for the well-being of children;

(3) affecting the well-being and development of children and

(4) being explicit about the paradigms and principles they operate within.

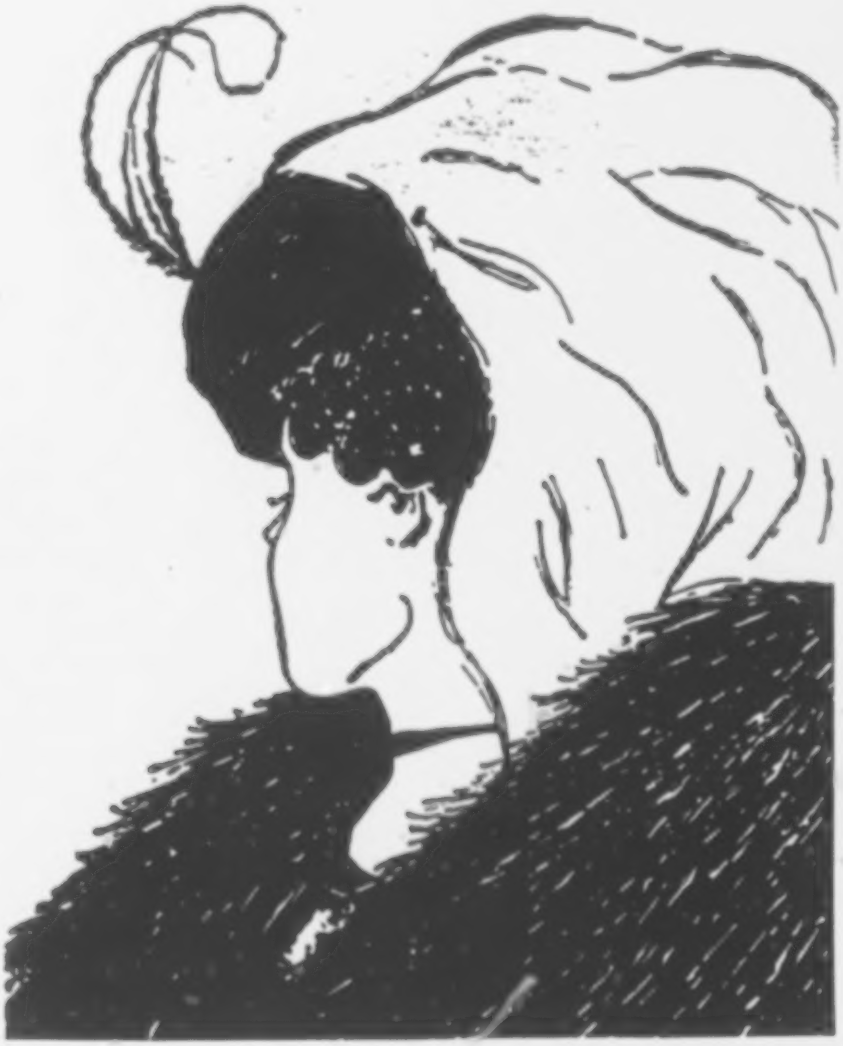
The word paradigm comes from Greek. It was originally a scientific term, and is more commonly used today to mean a model, theory, perception or frame of reference. In a more general sense, it's the way we "see" the world - not in terms of our visual sense of sight, but in terms of perceiving, understanding, interpreting.

A simple way to understand paradigms is to see them as maps. We all know that a map is not the place itself but an explanation of certain aspects of the place. That's what a paradigm is - a theory, explanation or model of something else.

Each of us has many maps in our heads, which can be divided into two main categories, maps of the way things are, or realities; and maps of the ways things should be, or values. We interpret everything we experience through these mental maps. We seldom question their accuracy; we're usually even unaware that we have them. We simply assume that the way we see things is the way they really are or the way they should be.

And our attitudes and behaviours grow out of these assumptions. The way we see things is the source of the way we think and the way we act.

As an example take a few seconds to look at the following picture.



How would you describe the woman you see? How old would you say she is? What is she wearing? In what kind of roles do you see her? Do you describe her as in her 20s? Wearing a necklace? With a small nose? A demure presence? As a dancer? An actress? Or do you describe her as in her 60s or 70s? As looking sad? With a big hooked nose? Wearing a shawl over her head? Someone you would help across the street?

This picture illustrates how two people can see the same thing, disagree and yet both be right. It's not logical, it's psychological. Even where people are warned that another point of view exists and half are given an image of the young woman and half an image of the older woman, they are hard pressed to see both images in the picture used here. In fact, the image you first see is probably the one you are conditioned to see and when we look away and back again most of us will see the image we first saw. If ten seconds can have that kind of impact on the way we see things (our paradigms) what about the conditioning of a lifetime?

The 90 percent of people who typically see the young woman in the composite picture when conditioned to do so, find it difficult to think in terms of helping her cross the street. Both their attitude about her and behaviour toward her have to be congruent with the way they see her. The seeing or basic paradigms are what cause attitudes and behaviour.

"Where we stand depends on where we sit". Paradigms are so powerful because they create the lens through which we see the world.

What we need in parent support work in New Zealand is agreement on the basic principles so that people are forced, if necessary, into changing their paradigms.

The following is an example of a paradigm shift.

"Two battleships assigned to the training squadron had been at sea on manoeuvres in heavy weather for several days. I was serving on the lead battleship and was on watch on the bridge as night fell. The visibility was poor with patchy fog, so the captain remained on the bridge keeping an eye on all activities.

Shortly after dark, the lookout on the wing of the bridge reported, "Light, bearing on the starboard bow."

"Is it steady or moving astern?" the captain called out.

Lookout replied, "Steady, captain," which meant we were on a dangerous collision course with that ship.

The captain then called to the signalman, "Signal that ship: We are on a collision course, advise you change course 20 degrees."

Back came a signal, "Advisable for you to change course 20 degrees."

The captain said, "Send, I'm a captain, change course 20 degrees."

"I'm a seaman second class," came the reply. "You had better change course 20 degrees."

By that time, the captain was furious. He spat out, "Send, I'm a battleship. Change course 20 degrees."

Back came the flashing light, "I'm a lighthouse."

We changed course."

And we know enough about 'lighthouse' principles that govern human effectiveness - that are there, that are just as real and unchanging as e.g. the law of gravity is in the physical dimension.

Take for example:

(1) the principle of fairness - necessary for the development of concepts of equity and justice;

(2) the principle of integrity and honesty - necessary for a foundation of trust which is essential for co-operation;

(3) the principle of human dignity and the right to life and liberty;

(4) the principle of potential and growth - the idea of humans being embryonic, able to grow and develop and in the process releasing or realising their potential.

In all life, there are sequential stages of growth and development. A child learns to turn over, to sit up, to crawl and then to walk and run. Each step is important and each one takes time and no step can really be skipped. We know and accept this fact or principle of process in the area of physical things but find it harder to accept or understand in emotional areas and in human relations. So when we are relating and working with people we often look for a shortcut, try to skip vital steps or processes in order to save time and effort and still reap the desired result.

It is easier to operate from a low emotional level and give high-level advice than to try and operate from where people are at, to try and take responsibility for our paradigms and perceptions being only part of the picture and above all to try and listen more than telling.

Anybody doing parent support work can borrow or use strength from their position and authority and "force" people to do what they want them to do. But what happens when the source of borrowed or imposed strength changes or is no longer there?

## WHAT RESEARCH TELLS US

People such as Brickman et al (1982); Cochran & Woolever (1983); Florin & Dockecki (1983); Weiss (1979 & 1988); Dockecki et al (1979); Powell 1979 & 1983) Gray & Wandersman (1980); Ruth Paz (1990); Lipton (1983), e.g. tell us a lot about parent or family support.

(1) Those being supported can develop an active sense of power and control over their lives if they are not blamed for their problems but are seen as responsible and able to solve them;

(2) Professionals can serve as resources for families who define their own needs and play an active role in a process of self development;

(3) Community compatible programmes are necessary because families are part of communities;

(4) Real accountability must be to the recipients and that adults (like children) relate to programmes and their environment according to their past and present life circumstances and concepts so for programmes to work the parents or families need to be the "organisers" not any project staff;

(5) Respect for the competence of parents and recognition of the knowledge they have of their own children is vital;

(6) The process of participation may be more important than the number of times parents e.g. attend group sessions;

(7) While "off the shelf" models can be used to give something seen as lacking to parents, parent support should be respectful intervention using processes and principles that are likely to democratise or share knowledge and power through and with families and communities;

(8) A sense of reciprocity, of giving as well as taking is essential;

(9) Parents reply on "similarly situated" friends as agents of advice and support, so encouraging community networks is important.

There are plenty of "off the shelf" models. In America e.g.:

Connecticut has Parent Education and Support Centre (since 1986).

Maryland has 8 Family Support Centres (since 1986).

Minnesota has had Early Childhood Family Education (since 1975).

Missouri has Parents as Teachers (since 1981).

Kentucky has had Parent & Child Education (PACE) (since 1986).

Arkansas imported The Home Instruction Program for Pre-school Youngsters (HIPPY) from Israel in 1986.

Iowa has the Family Development Demonstration Grant (since 1988).

Oregon started a State Early Childhood Initiatives Project in 1986.

Vermont has Parent-Child Centres (since 1987).

Washington has an Even Start Program (since 1987).

In Paths to Empowerment (1990) Ruth Paz says that the 10 years work in Israel supported by the Bernard van Leer Foundation illustrate that inflexible models are not about community education. The elements she says are predicators of success are: knowledge shared, training, the experience of self-initiated activity and of self-management; awareness of the benefits of mutual aid and co-operation. Beyond that she says, it is up to the community itself and the people who live in it to carry matters forward.

She points out that all of this is not to say that community-based education is the easy route. To struggle to understand people's real needs - and even more so, to help them become aware of their own needs; to convince them that it is within their capacity and power to change their life situations and those of their children; to disabuse them of their expectations of magic solutions and immediate results and convince them of the need to move step by step; to resist the temptation to do things for people, rather than helping them to help themselves : none of these are easy processes. Far simpler, and certainly far less trying, is to intervene with pre-packaged, standardised programmes : 'one size fits all'. The question posed is, how well can one garment be made to fit all - and how well will it wear? The Bernard van Leer Foundation is increasingly taking the view that lasting change cannot be superimposed, but must come from within the individual and the community and that the only change that is inevitably superimposed is destructive change.

In his treatise on social policy and social philosophy, Richard Titmuss makes the point that "social policy, in one of its potential roles, can help to actualize the social and moral potentialities of all citizens" (1970, p. 238). Titmuss's point is particularly relevant now. Thought needs to be given to the way policy and practice can contribute to the voluntary ways people help one another - to social policies that recognize, maintain, and strengthen such efforts. We need to create social forms that encourage and allow us to help one another, to experience giving and receiving.

In New Zealand at the moment there are overlapping perspectives, representing various domains of interest such as advocates for child growth and development, advocates for the poor, advocates for Maori, advocates for ethnic minorities, family specialists, welfare specialists, health specialists, labour policy experts , feminists, and welfare reform proponents.

Because each domain relates to different agencies there is constraint because of an inability to communicate across conceptual frameworks and because of competition and turf guarding.

An emphasis, as we have in New Zealand at the moment, on developing individual programmes leads to a fragmented and inconsistent system with each programme conceived as "the solution" to "the problems" instead of being designed as one link in a diverse - yet comprehensive and coordinated overall plan, building on the strengths of what already exists.

The danger with this is that each programme is housed in a different government agency and/or funded independently; each programme defines its own goals and approaches; and each programme develops its own constituency at political and service delivery levels when a co-ordination of principles, paradigms and funding sources is what is needed.

Walter Barker from the University of Bristol (1991) writes of a Network for Developmental Initiatives in the Community as follows:

"The well-being of the infant child and its parents are issues of immense importance, aware as we are of how strongly the child's health and development in the first five years can affect its entire future. In the United Kingdom the battle is being waged between what one might call the narrow professional model and the broad environmental model. The narrow model sees the well-being of the child as the particular concern of doctors, health visitors (public health nurses), social workers, psychologists and others, with parents on the periphery of concern. The broad model sees the child's well-being as depending primarily on the wider environment of parents, home and community, so that real and lasting improvements in well-being can only come about, as Urie Bronfenbrenner has pointed out through changes in the careers of those children."

"The biggest challenge to the program has not involved the field work itself. When people are empowered and given information to enable them to use their new-found power or control over their lives, they do not easily reject the new insights or revert to a state of dependency and hopelessness or failure. The biggest problems and setbacks have arisen through trying to persuade professionals that this kind of motivation can only enhance their role, provided they recognize the need to move into the background and surrender the expert status on which so many depend for job satisfaction."

In conclusion, the Early Childhood Development Unit's Parent Support Projects should be seen as parent or family resource projects that are aimed as much at family self determination as at addressing family needs themselves. They should be evaluated on the paradigms or maps, they are based on the principles that act as compasses for project workers and the families involved.

An ecological and principled perspective on individual - family - community - society interactions suggests the need for dramatic changes in the ethos of professions and institutions serving families. There are e.g. very basic and dramatic differences in the assumptions and paradigms and principles of what are called treatment or prevention or promotion models. It is community development or promotion models that are needed to strengthen positive functioning of families, rather than strategies designed simply to prevent negative outcomes. We will then have encounters of a third kind with all support of parents and families evaluated for the attitude rather than the knowledge of the workers and for the principles and processes used.

No reira, Kia ora hui hui mai tatou.
Tena koutou, tena koutou, tena tatou katoa.

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# DOES MORE EQUAL BETTER, AND FOR WHOM? DISCOURSE AND PRACTICE IN PARENT EDUCATION

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**Abstract:** The purpose of this paper is to examine some of the contemporary discourses of Parent Education in the literature concerned with the care of babies and children. The analysis is informed by the work of Foucault. Ethnographic material gathered during time spent with one family over the first year of their child's life is drawn on to explore how these discourses are experienced in the lives of parents. It is argued that such an analysis is important to foster a critical tradition in the area of Parent Education, and so that future policy and programmes for Parent Education are not formulated in the abstract.

The contradictory effects of education have been clearly articulated with regard to education in general. "Education" is understood to be a means of social production, with effects ranging from social reproduction and control, to social change and emancipation. This recognition of the contradictory outcomes of education has given rise to a vigourous critical tradition in the literature addressing the education of children and young people and some forms of adult education. However, there is a surprising lack of critical writing within the field of parent education, and more generally the dominant assumption appears to be that "more equals better". This is reflected in the frequency with which "more" parent education is invoked as the panacea for all our social ills. However, it is because parent education is so frequently cited as the solution to such diverse social problems that I believe we need to critically examine the ideas and practices of parent education, and to ask what is effected in daily lives by these ideas and practices. In the analysis that follows I examine some of the ways in which contemporary discourses surrounding becoming a "parent" achieve their authority (1). To consider how these discourses are experienced in the lives of particular individuals I draw on ethnographic material from a family I have worked with during the first year of their first child's life (2). The main focus of the analysis is the issue of infant's sleep at night. Although this is a very specific issue to use as a springboard for considering Parent Education in general, I trust that the analysis will support my belief that there is a great deal to be gained from working in detail with concrete examples from people's lived experience.

In the material that follows my ideas have been influenced by Michel Foucault, a French thinker who devoted much of his intellectual life to exploring the realms of discourse. Put most simply, Foucault (1980) used "discourse" to refer to any set of regulating statements which govern the way we live our lives and think about our social world. It needs to be stressed that in this context "statement" refers to meaning as it is expressed in language and also to meaning as it is conveyed in the way that things are done (3). Foucault proposed a method of social analyses based on this understanding of discourse which he referred to as the genealogical method. This involves the identification of various discourses and the location of them in the broader context of those practices with a tendency towards normalisation (Foucault, 1979). Examining the political role played by the social sciences in the definition and dissemination of normalising practices is a crucial part of this process. This means we need to consider the ways in which knowledge about Parent Education, including research about Parent Education, inscribes, not merely describes, what is considered "the norm".

There are several features of Foucault's conception of discourse that I have found particularly useful. Firstly it offers the possibility of thinking of discursive fields, such as that of parent education, as being constituted by discourses which may be discontinuous and contradictory. As will become evident in the analysis that follows this provides a way of making sense of ideas and practices that may co-exist at the same time but seem to be driven by opposing philosophies. Secondly it offers the possibility of considering the range of subject positionings that are articulated by different discourses, and the possibility of considering the ways in which individuals experience multiple and contradictory subjectivities. This opens up the opportunity to consider the ways in which individuals may experience different moments and aspects of their lives in conflict. Thirdly, as already noted, Foucault's conception of discourse proposes that the social space in which we live and the possibilities it offers are formed not just through the expression of ideas and meaning in language but also in the manner in which things are said and done. As an extension of this conception of discourse Foucault (1980) argued that discourses did not simply produce meaning and various ways of thinking but they also produce and constrain the ways in which we experience the world through our bodies. In contrast with other understandings of discourse, which concentrate on what is said, this particular conception of discourse focuses on meaning as it is articulated in language and in practices, and so leads towards an understanding of embodied lived experience.

However, it is not clear from Foucault's work why individuals accept some discourses and resist others. Why is it for example that some mothers give authority to "statements" made by Plunket Nurses while others contest these? Why do some fathers feel at ease with the practices of groups such as Parent Centre Antenatal Classes and others feel alienated? Foucault (1972) argued that our analyses should be focussed on situations in which there is systematic institutionalised justification of certain meanings. However, I have argued elsewhere that to explore the ways in which meanings become embodied in our experiences and give rise to particular subjectivities we need to return to the nebulous ground of the mundane experiences of our everyday life (Loveridge, 1989). We need to explore the interplay between previous lived experience and discourse and what people then make of discourse.

In his later work Foucault (1979) insisted that the production of knowledge is not only historically and socially located but inextricably linked with power in a formative sense. In other words he saw power not merely as a negative force or oppressive practices but linked with the production of the social world through the construction and legitimation of particular discourses and practices. In the context of Parent Education this means examining the construction of statements which regulate the care of infants and children and the lives of their caregivers, and examining how these statements are legitimated and achieve their authority. This particular understanding of the nature of knowledge and power means that for Foucault "the real political task in a society such as ours is to criticise the working of institutions which appear to be both neutral and independent; to criticise them in such a manner that the political violence which has always exercised itself obscurely through them will be unmasked so that one can fight them." (Foucault, 1974:187). Thus it is not just a matter of "taking account" of the social and political situation and motivation of the producers of knowledge; the task is to recognize the link between knowledge and power and to ask what is effected by particular claims to truth. This particular approach is concerned with the architecture and staging of knowledge and the nature of social relations inherent in the staging of that knowledge. The questions we need to ask then are concerned with the establishing the rules which allow particular statements to emerge and identifying the devices employed to generate and buttress authoritative knowledge and social and political arrangements: What can be said? What cannot be said? Who has the authority to speak? How is this authority achieved? Which ideas are assumed to be fundamental? What are the arguments which are valued? Which are excluded? Who listens? (4)

In essence, in the material that follows I am interested in establishing the ways in which contemporary statements about parent education establish their neutrality, their independence and their authority, and examining what is effected by their particular claims to truth (5). Historical work on the ideology of motherhood has revealed that in the period from the turn of the century until the early 1950s the dominant statements governing the practices of those caring for the young emanated from the medical profession. These statements clearly nominated mothers as those who listen to and carry out the advice. Primarily the development of the child was construed as a biological process about which the doctor knew best, with "mothers" instincts, the experience of female relatives and neighbours being discredited. Although doctors were initially accorded the status of expert in the area of infant feeding practices, their status as expert quickly extended to other matters such as sleep, handling of infants, toilet training, bathing and discipline (Apple, 1987; Reiger, 1985).

By contrast, contemporary discourses in parent education constitute the practice of parenting as a psychological matter for both parents and children, and nominate "parents" as those who will listen to and carry out the advice. In identifying this shift in the discursive formation I am not wanting to argue that it signifies a complete rupture but rather that psychological discourses have become dominant. In so far as biological ideas are foundational to both medical and psychological discursive formations there are continuities as well as discontinuities and contradictions. This is illustrated clearly in the policy put forward by the New Zealand Board of Health Committee on Child Health Parenting (February 1988). It lists the child's needs as physical and psychological. The physical are dealt with as a list: "healthy food, adequate clothing, appropriate shelter, good sanitation, enough space and safe, yet challenging opportunities for play and other experiences" (p.9). The psychological needs are detailed in six paragraphs dealing with the following: social relationships, healthy emotional development, the modelling of values and beliefs by parents, the need for intellectual stimulation, the need for mastery over the body, parents role in children's learning.

Books on childcare that were referred to by the people who participated in my research primarily construct the care of infants as a psychological problem. Some of the authors locate their advice clearly within a developmental framework, others emphasise a skills based approach, while some combine both (5). For example, Penelope Leach, author of Baby and Child argues that

> "The more you understand him and recognise his present position on the developmental map that directs him towards being a person, the more interesting you will find him." (Leach, 1988:8).

In a book titled Nighttime Parenting, William Sears advocates a style of parenting he refers to as "attachment parenting". Sears argues that

> "parents who practice the attachment style of parenting know their children well. They are observant of their infants cues, respond to them intuitively and are confident their responses are appropriate. They have realistic expectations of their child's behaviour at various stages of development, and they know how to convey expected behaviour to their child." (Sears, 1985:8).

Kate Birch, author of Positive Parenting argues against an ages and stages approach as she believes it prevents parents from seeing the children as themselves and hence hinders them in "helping children to develop their potential". Instead she offers a

> "system of child management designed to help children become 'their own people'; it is not a system for controlling children, but rather a system for developing potential in both parents and children."(Birch, 1984:2).

Christopher Green, author of Toddler Taming, draws on both developmental understandings and skills;

> "To enjoy toddlerhood you need to know what to expect, then tuck some toddler taming techniques up your sleeve and go for it" (Green, 1990:10).(6)

There are many other "sources" that could be considered in making this argument, for example the material presented in antenatal classes, community based parent education courses, representations of parenting in advertising and film, other research on the experiences of first-time parents etc.(7). However, to extend the analysis in this way is beyond the scope of this paper. The focus of this paper is to establish the architectural devices that empower contemporary authors to define the normative dimensions of people's parenting practice. How does the knowledge that is currently presented to parents gain it's authority? How does it appear to be both neutral and independent? There are three main devices which I have isolated for the purposes of this analysis, however they are clearly interrelated.

## I. THE EXPERT NON-EXPERT:

In a curious contrast with the literature that was directed at parents earlier in this century that clearly indicated that "doctor knows best", contemporary writers establish their authority by emphasising their neutrality. In various words, they claim they are not another "expert" telling you how to do it, rather their aim is to increase parents confidence. Some authors refer to a general sense of confidence while others refer to the confidence parents have in their instincts or commonsense.

Penelope Leach writes in her introduction "So although this is a book, it will not suggest that you do things 'by the book', but rather that you do them always by the baby" (Leach, 1988:8). Kate Birch writes

> "Positive Parenting was written with the aim of putting parents back in the driving seat. Over the last few years parents have been bombarded with the 'shoulds' and 'oughts' of parenting. This book has tried to offer a variety of techniques

> together with the message that no one else can tell you what is best for your family." (Birch, 1984:94).

William Sears puts it this way

> "Cosleeping was common in the western world until the twentieth century when mothers lost confidence in their own instincts and followed the advice of a few influential but misguided experts." (Sears, 1985:35).

Sears in fact explicitly discredits the view that the doctor knows best:

> "Where baby should sleep is not a medical question requiring a medical decision... When it comes to mother-infant attachments your instincts should be followed above the advice of anyone else." (Sears, 1985:37).

Christopher Green goes even further: he wonders "if all us experts were to be blown from the face of the earth, would parents be any worse off." (Green, 1990:5). Green also uses humour to disguise the fact the he does himself put forward some strongly expressed opinions about toddlers, life and the universe! For example Green's "five ingredients" are listed after the following paragraph.

> "Most of what has come and gone before was little less than an orgy of academic nitpicking but behind this glitzy window dressing of childcare there are hidden some solid and vitally important ideas. It is these ideas which provide the foundation for strong and emotionally secure children." (Green, 1990:1).

## II. THE ESTABLISHMENT OF CREDENTIALS:

Credentials in the field are nonetheless established. It is interesting to note that although Green and Sears stress the problems with experts and their opinions the most, both of them have their medical qualifications on the covers of their books, and both refer to their "practices", which we are to understand as "medical practices", on the first pages of their respective texts. Penelope Leach has a paragraph on the first page which lists her academic qualifications, including a Phd in Social Psychology, followed by her areas of research, professional experience and affiliations in the field of child development, and other published books and videos. These are not referred to in the text itself. Kate Birch has a section of acknowledgements in the front which indicate that her work has been supported and sponsored by various institutions such as the Mental Health Foundation. She also refers to her work in a Child Development Centre in the first pages, and has a small paragraph about herself at the end of the book indicating she is a trained psychologist, has ten years of experience working with families and parent groups, and was Executive Director of the Human Rights Commission.

The author's own experience as a parent, and the experiences of other parents they have had contact with are also used to establish credibility. Green's opening lines are

> "I used to think I was a real expert on child care, but that was before I had children myself. When my boisterous boys arrived I discovered how little I knew, and how out of touch and impractical was the vast majority of child care information of the day" (Green, 1990:v).

A few paragraphs later, referring to the second edition of his book he states:

> "We are now in the 1990s and my ideas have become much stronger, clearer and more effective. So they should as I have talked to over 50,000 parents since Toddler Taming was first published."

Penelope Leach vouches for the trustworthiness of her advice in the following way.

> "So a large part of this book is devoted to helping you to find ways that work for you. Some of them came directly to me from my own mother; some of them were learned the hard way on my own children; most of them come from the thousands of other parents who let me watch them coping." (Leach, 1988:15).

William Sears explains that he had learnt through his experience in his medical practice and his wife's and his

> "struggle to develop our own parenting style... that most problems in child rearing do not have easy answers ... then one day a wise colleague took me aside and confided that when he wanted to know the answer to a difficult question on parenting he asked an experienced, intuitive mother Eureka! Over the next twelve years this is just what I did. I learned form experienced mothers" (Sears, 1985:xiv).

Further on he adds "Paediatricians are not uniquely blessed with easy sleepers. I, too, have spent many hours in nighttime fathering" (Sears, 1985:xvi). Kate Birch acknowledges

> "Many people helped to make Positive Parenting. First and foremost the parents of Taranaki, who helped me to learn about parenting."(Birch, 1984:vi).

## III. STATEMENTS ABOUT SOCIETY AND CULTURE:

The third device that I want to consider is the use of general statements about the nature of society and other cultures to legitimate the point of view of the author. Again, there is an interesting contradiction here. Global statements are made about the changes that have occurred in the nature of our own society, suggesting that this is why such parent education material is needed but very little is said about the diversity that exists within our society, and the implications of this for the way that people parent. Penelope Leach suggests that she is passing on "a complex and entrancing folklore of childcare which, once upon a time, you might have received through your own extended family." (Leach, 1988:15). Green writes "The breakdown of the extended family has left many new parents isolated and uncertain" (Green, 1990:2). William Sears argues "Parent burn-out is seldom the fault of the child. It is the fault of a society in which there has been a breakdown of the extended family, the parents' traditional support system."(Sears, 1985:xv). Interestingly, none of these writers provide any evidence to support their contention that there has been a breakdown of the extended family, and that as a consequence families feel unsupported today. While some of the books include special chapters on the situation of single-parent families there is no sustained analysis of the wide variety of social situations in which people find themselves parenting. The issues which are addressed by the authors seem abstracted from the details of people's daily lives. The texts are written as if the reader is a blank slate, bringing nothing to their reading. It is as if the material is directed at a person who is essentialised as "the parent who wishes to do the best for their child". Very little is written about the ways in which different social and cultural conditions give rise to a myriad of ways in which it is possible to care for an infant or child.

Likewise references to practices of parenting in other cultures are made to legitimate the view being put forward by the author, and again these references tend to be made in very global manner without considering the details of the context in which the practice occurs (8). An interesting example of this which has received attention in New Zealand recently is the practice of infants and children sleeping with their parents. A number of books advocate "family beds" and refer to this as a practice that is popular in other cultures. For example under a heading titled "Cultural Programming" William Sears writes "Isn't sleeping with a baby an unusual custom? Actually just the opposite is true. Babies sleeping with parents is the usual custom in most cultures around the world." (Sears, 1985:35). In contrast with those books advocating family beds, recent publications from the National Children's Health Research Foundation have recommended that to lessen the chance of cot death "Babies should sleep by themselves, not in a bed with others, but should be in the same room as the parents for the first six months". This recommendation was featured in the magazine Little Treasures (9) and generated a number of letters in which several of the writers referred to cosleeping being a common practice in other cultures. One writer referred to the statements that have been made about the value of sleeping with your baby by "respected paediatricians such as Dr Eric (sic) Sears". A letter was also published by Dr Shirley Tonkin, National Co-ordinator of the Cot Death Division of the National Children's Health Research Foundation in which she examined in more detail the specific circumstances of "bed-sharing" in other cultures, and contrasted these with the features of the European style bed.

Clearly there are other stylistic devices that are used to legitimate the knowledge that is presented by these authors. However I would now like to move on and begin to consider how these discourses are experienced in the lives of people who live many different social relations. For the purposes of this paper I have restricted my analysis to some of the interview material that one couple and I produced as we talked about their baby's sleep (10). In the period in which medical discourse dominated the literature on the care of infants, sleep was spoken of in terms of scheduling, with regularity and repetition being the prime concern. In the contemporary literature, dominated by psychological discourse, there are two competing categories of regulating statements which can be metaphorically contrasted as the "holistic" and the "behaviourist". In terms of the books referred to in this paper, Sears advice on the sleep of infants and children falls within the holistic approach. "Nighttime Parenting" is one of the practices of a total parenting style he refers to as "Attachment Parenting" which includes creating a peaceful womb experience, breast feeding with child led weaning, responding promptly to baby's cries, travelling as a father-mother-baby unit (Sears, 1985:2-6). Green's advice on the sleep of infants and children falls within the behaviourist approach. He refers to his technique as the Green Controlled Crying Technique which he describes as follows

> "Controlled crying refers to my method of letting children cry for a short period, then coming in to give some, but not full comfort, letting them cry a little longer each time, giving more incomplete comfort, gradually increasing the crying time between comforting until eventually they say: 'I know she loves me, I know she will always come but it is just not worth all the effort'." (Green, 1990:125).

The book that is referred to in the following material as "The Sleep Book" is based on the same idea of leaving infants and children who are not sleeping when they should be to cry (11).

The people's experience I will be drawing on in the material that follows I will call Liz and Peter, and their baby Russell (12). At the time Russell was born Liz was 28 and Peter 30. Liz and Peter have lived in Palmerston North all their lives. Liz's immediate family, and a large number of her extended family all live in Palmerston North. Peter's parents immigrated to New Zealand in the early 1950s. He has no extended family here, but some of his siblings and his father live in Palmerston North. The other brothers and sisters live in New Zealand. Peter and Liz feel that they are in quite close contact with their family members, particularly those living in Palmerston North. When I first met Liz she was working as a nurse. She took parental leave, and then when Russell was about 6 months she began working the equivalent of one day a week. Peter initially had a job driving, which took him away from home 13 hours every day. When Russell was around 5 months Peter became self-employed, which meant working fewer hours in a day and more flexibility in the hours worked. Before Russell was born both Peter and Liz attended Antenatal Classes and both of them had read a number of books about birth and childcare. Throughout the year Liz continued to read widely and discussed what she read with Peter. Liz also attended La Leche meetings and joined a support group that had formed informally. A number of their family members, friends and church members have had babies and they felt they had spent quite a lot of time before Russell was born observing people with children.

One of the reasons for considering this family's experiences is that they do have family close by and they do spend time with their respective families. Their situation contrasts with the "norm" as it has been portrayed by the authors of the childcare books examined in this paper. As I have previously shown, these authors argued that the advice they were giving was necessary because people were no longer receiving it from their extended families, implying that if people were in a position to receive advice from the "traditional" source it would be the same as that offered in their book. However, in legitimating their authorial position in this way there is no space for any extensive discussion about the ways in which the social world in which the present generation of parents live offers different possibilities and constraints in they way they care for their children. On the one hand the authors have used "social change" to buttress their authority, but in doing so they effectively precluded other statements about social change. Generally the parents participating in the research were quite clear that some of their practices were consciously modelled on those of their parents but some things they did were quite consciously different. Reflecting on the way that she and Peter were going about raising Russell Liz said,

> Liz: "I haven't asked Mum a lot of advice along the way, I think I've tended to take it from people who are um...had more children of my own age group now. I've looked up to them rather than that generation back."
>
> J.L: "What sorts of things do you think that generation have done differently?
>
> Liz: "This whole routine thing, very regimented on that one and a lot more bottle feeding and introducing solids earlier, I used to get liver juice and things like that given to me when I was three and four months old in my Plunket Book, I mean I wouldn't dream of doing things like that to Russell."

In another interview Liz had also mentioned the matter of not asking about things from her mother.

> Liz: "I haven't asked Mum much, um, I think that generation, I mean a lot of things don't change but that generation had totally different ideas to our day and age and so I don't tend to ask her much."

Clearly though what has been done by the previous generation still exerts an influence, even if it results in something being done in contrast with what had been done before. At another point in explaining why she had initially bathed Russell in the morning Liz said,

> Liz: "Because I think I was sort of struggling in my mind with the parent's generation and how they in the Plunket books had 6, 10, 2, 6, and 10 they'd do things for the babies and they would always give them a morning bath..."

In the second interviews that I did with Peter and Liz when Russell was about six weeks old, Liz and Peter had just started having Russell sleep with them in their bed. Liz described Russell as a "very wakeful baby" and it could be anywhere between 9.00 and 1.00 am before he went to sleep. At this stage they mentioned they were concerned that Peter might fall asleep at the wheel during his daily 13 hours driving. Liz, Peter and Russell had been away on holiday with Liz's family. It was a small house that they stayed in and Liz and Peter were worried that Russell's crying would wake the other family members so they had taken him into their bed to sleep. On their return home they had tried putting Russell in his bassinet at night but after some difficulty getting him to sleep they ended up having him in bed with them. Liz described their feelings about it in the following words,

> Liz: " ...Well it's something that we're struggling and working through at the moment because not many people do it, or not many people talk about it and you don't like to tell very many people that you do it 'cos they'll think Oh you know what a funny couple Peter and Liz are...And you'd get used to it and they'll start to you know judge or ... our parenting and so we only just...I've been reading a book about it called Nighttime Parenting and that's really good, and I agree with what it says and I think you know I'd still like him in my own mind to be able to sleep in his bassinet and with us, but be able to do both, not just get totally used to us, but I don't know what's going to happen, we'll just play it by ear".

Later on in the interview Liz was talking about the books she had been reading she returned to Nighttime Parenting.

> Liz: "Right, it's only a cultural thing. I mean these primitive cultures have their babies with them all the time. They carry them with them, they have them everywhere and it's just our culture and society that say that your baby should be in a room on

> its own at night, when you know it just...to me it just seems so stupid when it's been part of you for nine months and then all of a sudden there's that separation. Yeah, there's a lot of ... a lot that ... a lot that it involves but I agree with a lot of it..." (13)

In an interview with Peter at the same period he referred to discussing the book that Liz had been reading. He also commented,

Peter:. ...the time is going to come when we're just going to have to say to people listen you know he sleeps in our bed and he feeds when he wants to feed and um you know they can either like it or lump it because its our baby and you know we've got his best interests at heart and if his best interest is that he sleeps in our bed and that he feeds when he wants to well that's our perogative not theirs."

When I interviewed Peter and Liz when Russell was 6 months where Russell slept was no longer an issue. At this stage he was mainly sleeping in his own room, though spent the occasional night with Peter and Liz. As Liz put it,

> Liz: "Yeah we sort of still do a bit of both but it's not an issue now ... we're comfortable and its working for us so.."

The nature of the preoccupation at this stage was that Russell had been waking 2-3 times a night. From the way Peter and Liz talked it was evident that they had discussed leaving Russell to cry. When I asked if they had talked about this Peter said yes, and went on to say,

> Peter: " Never works, well we have never left him for any long period of time and we don't really intend to...because um if they're distressed about something we still think that at the age he's at, 6 months, it's still hard for him to distinguish between what he wants and what he needs. In talking to the Plunket Nurse last time, last week too, she said there's no point really trying to train them into sleep patterns before they're about nine months old..."

When I interviewed Liz when Russell was 9 months she and Peter had changed what they were doing in terms of getting Russell to sleep. Before the interview itself Liz had mentioned "the sleep book" so during the interview I asked her how she had come across it.

> Liz: "Um, through friends at church, you know and I used to think...the pastor and his wife sort of mentioned it one day that they'd tried it on their kids and I thought ... I know it was pretty radical from what I'd I think I sensed through La Leche, cos it's not one of their recommended reading books and um it was against their philosophies and the pastor and his wife used it and I thought Oh, oh gosh, you know fancy them using that book and I thought Oh if it's alright for them, it's alright for us, it was funny I did think that. And we borrowed it from friends and I thought oh I'll just read it, you know, and that'll be it and the night we went away with friends whose daughter slept through the night and then they said after Russell in the next morning "Oh he's just like a newborn baby" I sort of had him in and out of my bed all the time with me, my sleeping bag, we were in a camp, and I thought after that...that night made me think Right OK we're going to try it out on you, so we just did and it did work and then I felt a conflict of you know the La Leche people because I know they wouldn't do anything like that"
>
> JL: And so what happened when you felt that conflict, how did you resolve it?
>
> Liz: I didn't (laughing) I just avoided it, I didn't sort of say anything about it to them or anyone from there I wouldn't sort of talk much about letting Russell cry or using it, I just wouldn't mention it. So it wasn't really resolved, it was just sort of brushing it under the mat. We can't let Russell rule our lives so I want to tend to you know draw back from some of the things they believe in and intervene a bit earlier than they would.

Isolating sleep in this way is clearly artificial. There are many more excerpts from the interviews that I would like to be able to share, to try and give more of an indication of the subtleties and complexities that were involved in this process of Peter and Liz reflecting on their practice of parenting. I do not wish to generalise from this one family's experience at this particular period to the situation of parents in general. However I believe that although this material addresses a very specific issue (ie. babies sleep at night) it does provide some interesting insights which should be considered in thinking about Parent Education more generally.

The interview material illustrates the way in which people may be positioned by various discourses through their sense of affiliation to different social groups. Liz sensed this herself as she reflected on her feelings about what the La Leche people would think of the practices advocated in The Sleep Book, and that she had thought that if it was alright for the pastor and his family to use the book, then it was OK for them. This particular moment in the interview material provides us with an interesting example of the way in which it is possible to live with contradiction and conflict. It is also revealing that despite the way I have thought about and conceptualised the research my immediate reaction was to ask Liz how she had resolved the conflict, as if all conflict must be resolved in the interests of a unified sense of self. The use and counter-use of statements by authority to justify certain practices is also illuminated in this material. Peter found it useful to draw on the knowledge of the Plunket Nurse in legitimating the course of action he and Liz were following. Liz made reference to the other sources of authority that she encountered through the groups she belonged to and the reading she did. However, they both also recognised the ways in which their practices could become constrained by what is considered "the norm" and that this may not be in their or Russell's best interests. Overall, this particular material provides a sense of the way in what seems possible, what seems not possible and what seems necessary is shaped by the material constraints and social context in which people live out their daily lives.

Without doubt there will continue to be many forms of Parent Education, and many calls for more Parent Education. The insights gained from the analysis of contemporary literature for parents and the interviews with Peter and Liz lead me to suggest that what is needed is not more Parent Education but the fostering of a critical tradition of Parent Education. A critical approach to Parent Education would reflect an understanding of education as part of the processes of cultural production and reproduction. The skills and understandings which it would work towards would be those which would assist mothers and fathers in examining what is effected by particular practices in the context of their daily lives. Future policy and programmes for parent education need to be driven by a concern for the social conditions in which the care of children and parent education occurs and to recognise that people are positioned through various discourses, some of which relate to their social relation as mother or father. Individual subjects are not blank slates nor are they passive...but clearly the social conditions in which individuals live both produce and constrain what seems possible.

## ACKNOWLEDGEMENTS

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## FOOTNOTES

(1) Busfield (1987:67) correctly argues that "the significance of parenthood is not the same for the two genders, a point which the recently fashionable term 'parenting' ignores". However, I have used parents because particular discourses are articulated in terms of "parents" and "parenting". I trust that the context in which this has been done with make clear that it is understood that the experiences of individuals and groups of individuals differ.

(2) This material comes from my PhD research. The main purpose of the research has been to examine the play of discourses surrounding becoming a "mother", "father" or "parent" in the context of the lived experience of particular individuals. The design of the research has been twofold:

1. An examination of the discourses which constitute academic and popular literature, social policy, institutional practices, social practices and media representations.

2. An ethnographic study with 8 couples who have become parents for the first time, using interviews, participant observation, schedules for recording daily activities, and video to focus on the practices of these first time parents within their social and material world.

(3) Foucault's The history of sexuality (volume 1) provides an interesting example of the way in which Foucault attempted to use the concept of discourse in a concrete analysis. For readers interested in the development of Foucault's ideas, and debates surrounding what particular concepts have meant in the context of particular works by Foucault there are now many texts available. Particularly useful is Michel Foucault: Beyond Structuralism and Hermeneutics by H.L. Dreyfus and P. Rabinow (Sussex, 1982). In what follows I am more interested in the possibilities offered by Foucault's work than teasing out the particular nuances, inconsistencies etc.

(4) These questions are adapted from a very useful article by Cherryholmes.

(5) In taking this approach I am not wishing to devalue the extent to which people may find books written for parents very useful and necessary. My concern is to understand how advice given by an expert becomes accepted as legitimate and used to justify certain practices in a way that the advice given by my local mechanic, electrician, mailperson, beekeeper or retired neighbour (all of whom have given me very helpful advice) does not, even though that advice may be the same.

(6) There are numerous books that have been written to aid parents in the process of raising their children. In this paper I have restricted the analysis to books which the people participating in my research referred to.

(7) It is interesting to note though that the parents involved in my research frequently used psychological terms in expressing their concerns and describing the way they cared for their infants. For example, one mother in responding to my question "What are the things that you are most likely to discuss with regard to Jamie" responded "We talk about his developmental stages and activities. We talk about those more than anything".

(8) This is not an argument against the use of ethnography and knowledge about practices in other cultures, rather it is a concern about the manner in which the material is used.

(9) Little Treasures is a magazine published in New Zealand by Treasure's Baby Club. "Treasure's" are a brand of baby care products, most well known for their disposable nappies. The recommendations of the Cot Death Division of the National Children's Health Research Foundation were published in Little Treasures issue 21, and the correspondence to which I refer was published in volume 23.

(10) At the period in which I was doing these interviews I was not myself a parent but hoped to have children in the future. It will be necessary to consider how that has influenced the material that I

and the people that I interviewed produced. At the time, I was aware that my positioning as "not-a-parent" allowed me to ask questions which may have seemed rather obvious but which I hoped would enable me to come to some understanding about the details of people's practices as parents. Subsequently, on the basis of my own experience as a mother I have become aware of the ways in which my practices as a mother have at some moments felt far more richly detailed than I could ever begin to describe, and at other moments so habitual that I have difficulty in isolating them. I did certainly not appreciate this at the time of the interviews.

(11) Ideally I would have included material from "The Sleep Book" in the preceeding analysis. I have had difficulty in obtaining a copy and so have not been able to do so.

(12) These names are pseudonyms which I have used to protect the identity of the people involved in my fieldwork. In deciding what biographical material to present I have selected material that seems relevant to the material I wish to discuss in this paper. Other biographical material which I have access to I have not included. I am aware that unfortunately this may result in the people I am referring to seeming to be "stick figures". The main reason for doing this is that in a community the size of Palmerston North people are able to be identified as participants in this type of research. This may not be an issue for this particular couple but I had to decide on an initial protocol for all the participants. At the beginning of the research I indicated that unless participants chose for it to be otherwise I would do all I could to protect their anonymity.

(13) At the time of the interview I had not seen the book Nighttime Parenting and did not understand what Liz was referring to when she indicated that there was a lot that it involves. Subsequently I have realised that she was probably referring to the overall style of parenting that Sears describes as "attachment" parenting.

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# ACCREDITATION: A CHARTER FOR QUALITY IN EARLY CHILDHOOD SERVICES

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A good deal of information is available now from a range of studies which points out that the development of young children is not inhibited or harmed in any way, and may even be enhanced in some situations, by attendance at a Child Care Centre, a key element of these studies however is that the centres involved provided care of a better than average standard, in other words, the centres all displayed features which are indicators of quality care.

This paper will outline a process by which elements of quality care can be measured and assessed. The process involves parents and the community as well as the centre, it can provide answers to many questions about the centre and is a readily identifiable indicator of quality.

While State or Local Government licensing regulations usually ensure that minimum standards of physical safety, hygiene, nutrition and staffing are maintained in child care those additional elements which ensure quality care are more difficult to regulate. However we do know what most of those features and characteristics of quality care are and in the past few years there has been evolving interest in developing procedures whereby child care centres can ensure that they are providing quality care. The paper will present details of the trailing of a child care centre accreditation procedure in order to establish discussion points for relating this to New Zealand's Charter procession early childhood centres.

**Accreditation broadly defined is**

"a process whereby a person or programme receives a certificate which indicates that certain agreed upon criteria or standards have been met"

**in doing so it**

"identifies and defines achievable standards" (in this case – of quality care)

**and**

"provides a professional, industry based scale of approval".

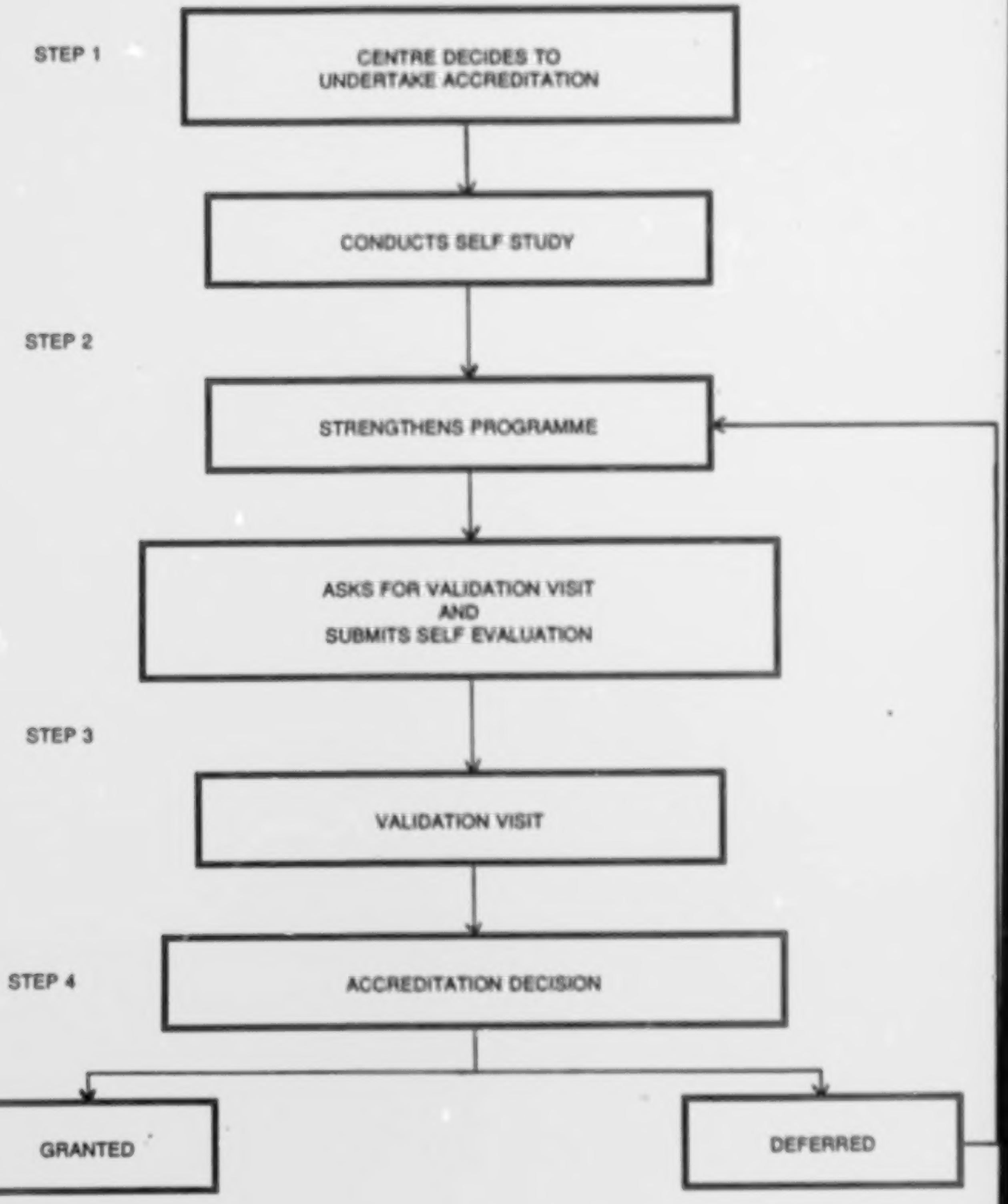
The National Association for the Education of Young Children (NAEYC) have established an Early Childhood Programme Accreditation procedure and this scheme has been modified for Australian use by Nadine McCrea and Barbara Piscitelli, School of Early Childhood Studies, Queensland University of Technology.

## THE ACCREDITATION PROCESS

Accreditation takes place in a number of stages which will now be described and which are set out in Table 1. (See overleaf).

## TABLE 1

## AN ACCREDITATION PROCESS


STEP 1
CENTRE DECIDES TO UNDERTAKE ACCREDITATION
CONDUCTS SELF STUDY
STEP 2
STRENGTHENS PROGRAMME
ASKS FOR VALIDATION VISIT AND SUBMITS SELF EVALUATION
STEP 3
VALIDATION VISIT
STEP 4
ACCREDITATION DECISION
GRANTED
DEFERRED

### Step One: Registration

A centre will write to the accreditation body to register their interest and in turn will receive materials which list the criteria and which also have suggestions for carrying out the response.

### Step Two: Self Study

The centre's staff, the director and the parent and/or management committee representatives (or proprietor) use the criteria to record how they (i.e. the centre) measure up. In some areas the response will be "we are doing a reasonable job"; in other areas it might even be "better than reasonable". In all probability there may be a few areas where the judgement might be, "not so reasonable".

The idea is that the centre then starts to "strengthen the program" i.e. they start to work on these "not so reasonable" areas, perhaps calling in outsiders for help when necessary. The accreditation body is not involved at this stage, they will only come when the centre wants them to make their assessment. Assistance could be sought from a range of sources including training institutions and the support and advisory staff of the regulatory bodies. It should be emphasised that the support and advisory process is quite separate from the actual validation process.

### Step Three: Validation

When the centre feels that they have met the criteria then a validation visit is arranged. The director completes the "Self Evaluation" forms in preparation for the visit. The validator visits to observe the programme to check that the various criteria are being met and then reports back to the accreditation body.

### Step Four: Accreditation Decision

The accreditation body looks at the Self Reports from the centre and at the validator's report and makes its decision, either to accredit or to defer a decision for a while longer. Deferral would usually be made on the basis that the centre needs a little more time to meet all the criteria successfully.

## THE ACCREDITATION PACKAGE

As mentioned previously the procedure used here is an Australian adaptation of the NAEYC procedure which has been in use in the U.S.A. for four or five years now. The package includes a guide to the process, a handbook of high quality criteria and various evaluation forms and questionnaires. The criterion handbook identifies 10 areas which relate to quality children's programmes and uses them as the focus for the accreditation process. These ten categories of quality include:

- Interactions among staff and children
- Curriculum/programmes for children

- Interactions between staff and parents
- Staff qualifications and development
- Staffing patterns
- Physical environment and setting
- Health and safety factors
- Food and nutrition issues
- Management and administration
- Evaluation

For each of these ten areas, criteria and descriptions of appropriate care or practice have been developed.

## TRAILING AND FEEDBACK OF THE SELF STUDY PROCEDURE

Trials were carried out in 8 centres in metropolitan Adelaide. As a first step groups of child care centre directors were addressed at two Children's Services Office regional meetings and were invited to participate. During this initial contact many centre directors felt that they were too busy to participate in the exercise. Some also felt that staff might be threatened by the process and what it might reveal about individual staff members. A selection of the initial reactions included:

- It would take too much time
- Staff are too busy
- It's too threatening
- Would be unfair
- There are too many changes in staffing for there to be any lasting benefit
- Don't know how the parents would react

In most cases however after the director had held discussions with management committees and staff the centres agreed to become involved. Following this self selection the materials were taken to the centres and briefings on the procedure were carried out. The eight centres represented a reasonable cross-section of the Adelaide population.

In order to gain feedback about the accreditation process itself and the procedures involved and in particular the "Self Study", those who participated were asked to complete an evaluation report.

A representative selection of responses to the first three questions are now presented.

**Q.1 How did you feel about doing this Self Study exercise?**

- Very worthwhile, a positive exercise, highlights both strengths and weaknesses of the programme.
- Gives very good recognition where staff are doing well.
- Felt a bit threatened at first – but it was OK really and not threatening at all.

**Q.2 Do you feel that it has any relevance to your work as a care provider?**

- Points out many things we should be aware of in implementing successful programmes.
- Made me focus on all areas.
- We need to review our programmes and ourselves more regularly.

**Q.3 Please comment on the relevance of the content in relation to –**

(a) Children in care

- Re-emphasises what is involved in quality care.
- Covers all those aspects required to promote quality care.

(b) Parents

- Enables parents to have input too.
- It's good for staff to be aware of parents' feelings.
- Parents can write things that they might feel uncomfortable about telling us face-to-face.

(c) Staff

- Very good in providing all-round awareness.
- Very good for keeping staff motivated and aware of quality care.
- Staff can be involved in evaluating their own performance and the programme which enables effective goal setting.

(d) Management Committee

- The scope of the study means there are implications for management committees both in positive recognition of staff efforts and areas requiring development.
- Provides a very good guide for staff development.
- Enables the management committee to become more involved in the centre.

## PARENT QUESTIONNAIRE

The parent questionnaire covered a range of areas and provided for some open ended responses.

A number of the parents who responded used the "any comments" area to provide both positive support for the centre and to comment on desired changes and developments in the programme.

Parents were not asked to comment on the accreditation process itself but the fact that they did respond with comments in either direction does indicate that parents are comfortable with the process.

## EVALUATORS COMMENTS

1. The process is very worthwhile, for all those reasons mentioned above. There are positive spin-offs for children, parents and staff.

2. The responses provide well documented information on those aspects of the centre's operation which are going well. This is a great boost for everybody involved because too often we tend to focus on what is going wrong.

3. They also give indications of areas where development is still needed and in addition:

   - Would be useful for the induction of new staff members;
   - Would be helpful in preventing staff burnout by pinpointing "trouble spots";
   - Provide an excellent communication system between staff, director, parents and management committee;
   - Has potential value in being used in team building.

4. The trailing also provided useful information about the criteria indicators in the self study and their strengths and weaknesses.

5. This trial also reinforced the point that the process itself cannot be rushed. Time is needed, first of all to show people the benefits of the process and secondly for actually working through the process.

6. Time is also needed to enable those who are to be involved to become comfortable with looking at themselves and with what they are doing and to be able to do this in a non-threatening way. Not everybody will feel comfortable at first with saying "I'm not doing too well here", but the main point to remember is that all this is internal, the validator only comes in when those necessary changes have been made and when everybody at a centre feels that they can meet all the criteria successfully.

7. It is a self-study process so the centre, in effect, is in full control of their own destiny which should be a comforting thought. It is an opportunity for people to take pride in showing what they are achieving and what they are doing in their centre.

## CONCLUSION

A significant feature of the accreditation process is that its objective is to ensure a charter for quality in early childhood services. It is based on agreed upon criteria of quality care which can be readily identified and assessed. It is a self driven process, for its motivation is in the hands of those who are being assessed. It is therefore positive and acceptable in ensuring that all who are involved can establish and maintain a charter for quality in services for young children.

## DISCUSSION POINTS

1. Are there ways in which an accreditation system could be used in New Zealand?

2. Do you see any relationships between centre accreditation and the charter for early childhood services?

3. Could accreditation be used in all types of early childhood services in New Zealand?

4. What benefits do you see – and difficulties – in using an accreditation system?

# QUALITY vs QUANTITY: ISSUES OF CHILD CARE PROVISION FOR SHIFTWORKING WOMEN

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The increased proportion of women in the workforce in Australia closely parallels a similar trend in other western countries. The demands placed on the early childhood profession to meet the varying needs of these women are increasing. This paper focusses on one group of shiftworking women: nurses. It considers the ways in which nurses manipulate their home lives and work commitments around what is available in terms of child care. The paper also considers the expectations these professional women have of the centres or homes in which their children are placed, The main conclusions of the paper are: (a) that considerations of quality child care are subverted by the quantity of places available, and (b) that increased provision should be the cornerstone for overall improvement in the quality of provision across the industry.

## Introduction

While there is a plethora of research and literature about the child care needs of working parents (see, reviews by Brennan and O'Donnell, 1988; Jankanish, 1988), there is relatively little that focusses specifically on shiftworkers. According to Brennan and O'Donnell (1988) shiftworkers face special problems with child care including the unavailability of formal child care out of hours or on weekends and the necessity for 'patchwork arrangements' commonly involving up to four different kinds of care for children.

This paper aims to provide a forum for consideration of some of the concerns of this group by focussing on the child care needs of nurses.

## Child Care Needs of Nurses

Maas (1990) comments that women in the paid workforce in general, particularly those with under-school-age children, 'have the highest rates of growth for both labour force participation and numbers employed' (p8). Since 1980, the overall numbers of women in the Australian workforce have increased by 36 per cent with one in every two of the 3,500,000 women over 15 years of age now in the labour force. Thus, child care is a major issue for women in the workforce or seeking to enter it.

Further, it is acknowledged that certain female dominated occupational groups experience particular problems with child care, and this in turn significantly influences job turnover and retention. One such group - which has been chosen for consideration in this study - is nurses. According to the National Council of Health Organisations (1985)

> *A very clear wasteful exploitative and discriminatory labour utilisation pattern is evident when historical nurse labour force patterns are examined... [N]ursing has experienced systematic structural discrimination which has been perpetuated by a wasteful and cruel over-production of nurses which has not resulted in oversupply due the extraordinary high wastage and turnover rates recorded for this occupation. Those wastage rates have come about due to the lack of adequate recognition of the child care needs of a primarily female workforce...*
>
> *(National Council of Health Organisations, 1985, p1)*

There have been three published studies which provide some insight into the child care needs specifically of nurses.

The first of these is a British study by Eardley and Simpson (1980) who surveyed 108 Hospital day nurseries in England. These day nurseries are child care centres primarily established for Hospital staff, particularly nurses. In reporting their findings on the use of the nurseries, the researchers state:

> *... most nurseries had been established for the recruitment and retention of staff - either staff in general or particular groups of staff. When we compared the reasons given by each nursery with the present use of the nurseries we found that for 38 nurseries (48 per cent) there had been some departure from original intentions: in most cases, the nursery had been established primarily for the use of nurses, but in practice, the facilities had been extended to all categories of staff.*
>
> [Eardley and Simpson, 1980, p.A-36]

Eardley and Simpson also reported that most of the nurseries they surveyed had been in existence for up to 10 years, although the nursery premises were invariably converted, rather than purpose-built. Three in every four of the nurseries opened before 8.00am and more than half operated for 10 or more hours per day, five days a week. The smallest nursery had 12 places, the largest 76 with the average nursery offering approximately 30 places. The upper age limit for the majority of the nurseries was five years or the age at which the child began full-time education. Only six of the 108 nurseries took children during school holidays. One third of the nurseries accepted babies of six months or younger. Although the Hospital nurseries surveyed were provided as a service by the DHSS, Eardley and Simpson cautioned that:

> *... the proportion of Hospitals providing any kind of child care facility for the use of staff is dwarfed by the proportion of Hospitals with no such provision; and the number of Hospital nurseries in the country as a whole who will accept babies from the age of six months is insignificant.*
>
> [Eardley and Simpson, 1980, p.A-39]

However, the authors conclude that their survey provided evidence that Hospital day nurseries were a suitable form of day care for children of working parents and that a number of Hospitals had gone some way towards facilitating the employment of women, particularly nurses, with children under school age.

A second, and more recent study, was undertaken by Kilmon and Poteet (1988) in the United States. Their research was specifically concerned with the child care problems of nurses who were classified as 'shiftworkers'. They found that the children of these nurses:

> *... most commonly were cared for in their own home or at a friend's or relative's home (55%). Only 8% were cared for at a child-care facility, a finding consistent with the lack of 24-hour child care facilities... Parents called upon a combination of alternate caretakers when the usual child care arrangements were not feasible, such as on weekends or when the child was sick.*
>
> [Kilmon and Poteet, 1988, p.372]

Kilmon and Poteet were struck by the lack of stability in caretakers and the daily schedules of nurses' children. They argued that this situation was stressful to the child who must constantly adapt to different people, locations and daily events.

These researchers suggested a number of interventions to overcome the problems they identified in their study. It is worthwhile citing these in detail:

> *One of the most obvious measures would be to insure that these employees have access to reliable child care during their working and/or sleeping hours. This may be done by establishing a Hospital-based child care center or contracting with an established agency in the community. Child care arrangements that are able to accommodate the child with a minor illness may help reduce absenteeism. A program of structured telephone access may benefit older children who can care for themselves for brief periods of time. A telephone counselor (perhaps a hospital volunteer) could maintain contact with these children, thus relieving their parents of the need to call home frequently.*
> [Kilmon and Poteet, 1988, pp.372-373]

The third study of relevance was carried out in Australia by Gatfield and Griffin (1990) and culminated in the widely publicised report, Shiftworkers and Childcare: A Study of the Needs of Queensland Nurses. Information was collected by these researchers through a series of visits to regional centres in Queensland and a survey of nurses (N=1,672) from each of these centres. In their report of the findings, Gatfield and Griffin marshal some convincing arguments for the provision of child care for nurses. For instance, they first cite a number of Government sponsored reports to support their case:

> *The 1987 Department of Employment, Education and Training (DEET) Report noted: "... there is every indication that nurse shortages will continue at least into the early 1990s". In noting the importance of wastage in reducing domestic supply, the Report commented that wastage arises principally from inter alia, "lack of child care facilities".*
> [Gatfield and Griffin, 1990, p.6]

In detailing their own findings about the child care needs of Queensland nurses, Gatfield and Griffin are trenchant in their criticisms of the 'irrational and economically inconsistent' policies that lead to lack of child care provision for nurses. They found that among the nurses they surveyed there was a

> *... high level of dependence ... on friends or family as principal carers. Only a very minor percentage was using either family day care or centre-based care for their children... Survey results also clearly established both a need and a demand for 24-hour, 7 day child care services.*
> [Gatfield and Griffin, 1990, p.43]

Gatfield and Griffin did apportion blame for lack of child care provision:

> *... local Hospital managements were not prepared to encourage and support local [child care] initiatives and certainly were not prepared to recognise that work-related child care should form an important component of their human resource planning and management.*
> [Gatfield and Griffin, 1990, p.43]

Summary: Although the three studies outlined above were carried out in different countries, there were four findings common to each. First, nurses have specific child care needs, especially those nurses who may be classified as 'shiftworkers'. Second, and closely related to the foregoing, there are particular issues associated with the providing nurses with suitable child care (e.g., the need for 24-hour, 7 day child care services). Third, the three studies identified a general lack of adequate child care provision as a major problem for nurses. Fourth, the turnover and retention of nurses was always linked, as a causal factor, to the adequacy of child care provision. This latter issue is worthy of further consideration given recent research on the turnover and retention of Registered Nurses in NSW Hospitals.

It was this fourth issue that prompted consideration of the present study.

## The Context of the Present Study

In 1990 two reports were made to various health agencies on factors affecting employment and retention of nurses (Battersby et al, 1990a; 1990b). Neither of these specifically highlighted child care as an issue of retention. What did become clear from these studies was that proportionally more nurses employed in the western area of Sydney (by the Western Sydney Area Health Service) had children living at home with them than did the general nursing workforce in New South Wales. (See Table 1)

Table 1: Ages of Children of the Nursing Workforce in the WSAHS Region

| Nurses with Children | WSAHS Nurses | NSW RNs |
|---|---|---|
| | % | % |
| Yes | 45.3 | 33.2 |
| No | 54.6 | 66.7 |
| Ages of Children Living at Home* | | |
| 5 years or younger | 40.2 | 32.5 |
| Between 6 and 17 years | 26.0 | 33.2 |
| Over 17 years | 25.4 | 32.9 |

* Percentages can total more/less than 100 because (i) some nurses have more than one child either in the same or different age group listed and/or (ii) some have children over 17 years but not living at home with them.

With this in mind, the Western Sydney Area Health Service (WSAHS) commissioned the present study to discern nurses' concerns or interests in regard to child care.

## The Nursing Workforce in the WSAHS Region

A general demographic profile of the Western Sydney region would reveal a younger population group seeking cheaper housing than in other parts of Sydney. In this area of Sydney there is also a rich mix of different cultural groups.

Because the present study aims to examine the child care needs of nurses in the WSAHS region, it is important to present a profile of the nursing workforce in the region as a backdrop to a consideration of the child care issues. Such a profile can be drawn from two recently completed studies by a Research Team from Charles Sturt University (see, Battersby et al, 1990b, 1990c).

Table 2 shows the workforce profile by highlighting two groups of nurses: those who are employed by the WSAHS; and those the general nursing population of New South Wales. There are several similarities and differences between WSAHS nurses and NSW nurses as a group. When these two groups are compared, there are slightly more males amongst the WSAHS nurses, more nurses with a degree or diploma qualification, more with greater than 10 years nursing experience, more who have been in their current position for more than three years and a similar percentage employed in registered nurse positions.

Table 2: A Profile of the Nursing Workforce in the WSAHS Region

| Characteristics | | WSAHS Nurses | NSW RNs |
|---|---|---|---|
| | | % | % |
| Sex | Female | 87.1 | 90.7 |
| | Male | 12.8 | 9.2 |
| Age | Under 30 years | 41.4 | 37.7 |
| | 31 to 40 years | 35.5 | 45.6 |
| | Over 40 years | 23.6 | 19.3 |
| Children Living at Home | Yes | 45.3 | 33.2 |
| | No | 54.6 | 66.7 |
| Qualifications | General Nursing Cert. | 73.1 | 85.3 |
| | Midwifery | 26.9 | 27.4 |
| | DipAppSc | 11.7 | 10.7 |
| | Degree | 8.6 | 5.5 |
| Years of Service as a RN | Less than 2 years | 11.2 | 15.2 |
| | From 2 to 6 years | 14.6 | 18.4 |
| | From 6 to 10 years | 22.0 | 22.9 |
| | More than 10 years | 49.0 | 37.3 |
| Career Break(s) From Nursing | Yes | 50.1 | 58.2 |
| | No | 49.9 | 41.7 |
| Length of Time in Current Employment | Less than 1 year | 29.2 | 31.1 |
| | 1 to 3 years | 26.3 | 30.4 |
| | More than 3 years | 44.5 | 28.5 |
| Position in Current Employment | Registered Nurse | 67.7 | 66.5 |
| | Clinical Nurse Specialist | 11.1 | 17.6 |
| | Other nursing position | 21.2 | 15.9 |

## Socio-Political Factors Associated with the Study

It needs to be understood that there were several factors relevant to this study that should be taken into consideration when reviewing its outcomes.

First, the study was carried out at a time when there was considerable flux concerning child care policy and provision. In 1990, the Prime Minister launched the National Child Care Strategy in which he gave a commitment to extend the 30,000 additional child care places to be provided by 1992-93 by a further 50,000 places by 1995-96. Although it was evident that a proportion of these places would be assigned to NSW and to Western Sydney in particular, it remained unclear throughout the study as to the precise number of licensed child care places that would become available in the WSAHS region because of the National Child Care Strategy. Likewise, towards the end of the present study, a State election in NSW brought promises of an increase in the number of child care places in Western Sydney. Thus, while it appears certain that there will be an increase in the number of licensed child care places in the WSAHS region and in Western Sydney, the extent of the increase, and when it will occur, is unclear.

Second, just prior to the commencement of the research, the Hawke Government signed the International Labour Organisation's Convention 156 on 'Workers with Family Responsibilities'. In announcing that the Convention was to be ratified, Prime Minister Hawke explained that:

> *The aim of the Convention is to commit Governments to making a fundamental objective of policy to enable workers with family responsibilities who are employed, or who wish to be employed, to do so without discrimination.*
>
> [Hawke, 1990, p.4]

In the field of child care, ratification of the Convention has prompted the Government *inter alia* to extend taxation concessions on financial contributions made by employers towards the cost of providing child care for their employees.

It is also likely to result in Government sponsorship of work-based child care for public sector employees. Again, while these initiatives will have flow-on effects in NSW, the extent of their influence on the provision of licensed child care places in Western Sydney is uncertain.

*Third*, the current study was carried out a time when a number of Hospitals in metropolitan Sydney were witnessing a change in the patterns of recruitment, turnover and retention of nurses (see, McGrath, 1990). While there continued to be a shortage of nursing staff in some specialist areas, nursing staff turnover across the State was on the decline and problems with recruitment of nurses appeared to be less critical than had hitherto been the case. These trends were also apparent in the WSAHS (see, Battersby *et al*, 1990b). This situation is important to consider in the context of the present study, particularly when examining the influence of child care provision on nursing staff turnover, retention and recruitment.

*Fourth*, due to an ongoing, vigorous and well publicised campaign by the NSW Nurses' Association, there has been a heightened awareness amongst nurses in NSW about their need for work-related child care, particularly 24 hour care. Since August 1984, the Association has had a child care policy. It therefore should not be surprising to find that nurses, probably more so than other professional groups, are generally well informed about the arguments for child care and have clear expectations of the need for Hospitals and Area Health Services to provide work-related child care.

## Research Instruments

Data was collected in this study using two different techniques: questionnaires and an interview schedule. The questionnaires were designed to gather background information on the respondents (e.g., age, sex, years of experience, number of children, etc.) and to ascertain the respondent's views about child care (e.g., availability, cost, etc.). The interview schedule focussed specifically on each nurse's experiences with child care.

## Part Two: The Impact of Child Care on Nurses' Careers

The following discussion is based on questionnaire data from 648 nurses and interviews with 129 nurses, all of whom were employed by the WSAHS. This combined sample represented about 25 per cent of all nurses working for the Area Health Service. The discussion will provide an analysis of the questionnaire data and, where appropriate, this will be embellished with anecdotes from the interviews.

Of the 648 nurses who completed the questionnaire, 483 had children living with them at home. This sub-sample of 483 was approximately 36 per cent of all nurses with children (N=1,359) employed by the WSAHS. Table 3 shows that in comparison with WSAHS nurses with children, the sub-sample had a higher percentage of nurses with children five years of age or younger and also a higher percentage with children in the school age group.

Table 3: The Sub-sample of Nurses with Children (N=483) Employed by the WSAHS

| Ages of Children Living at Home | Sub-Sample (N=483)* | Nurses Employed by WSAHS who have Children (N=1359)* |
|---|---|---|
| | % | % |
| 5 years or younger | 55.5 | 40.2 |
| Between 6 and 17 years | 75.7 | 26.0 |
| Over 17 years | 8.3 | 25.4 |

* Percentages can total more/less than 100 because (i) some nurses have more than one child either in the same or different age group listed and/or (ii) some have children over 17 years but not living at home with them.

Characteristics of the Sub-Sample (N=483): Two in every three nurses from the sub-sample were employed in Registered Nurse positions; approximately one in five was a Nursing Unit Manager or Clinical Nurse Specialist; and, one in ten of the respondents was an Enrolled Nurse. Half the sub-sample were in full-time positions; the other half were part-time. Ninety two per cent of the nurses were female. Three quarters of the sub-sample were under 35 years of age. One in seven had a degree or diploma qualification. Eighty seven per cent of the sub-sample had more than six years experience as Registered Nurses. Seventy per cent had a career break from nursing with nine in ten using the career break to care for children.

Types of Child Care Used: As with the sub-sample referred to in Part One of the discussion, only 54 per cent of the nurses in this sub-sample actually used child care. The types of child care they used are listed in Table 4.

Table 4: Types of Child Care Used by Nurses with Children Employed by the WSAHS

| Types of Child Care | % of Nurses Using this Type* |
|---|---|
| Long Day Care | 18.5% |
| Family Day Care | 6.5% |
| Occasional Care | 3.1% |
| Family Member | 34.3% |
| Baby Sitter | 22.6% |
| Pre-school | 4.1% |
| Holiday/Vacation Care | 4.8% |
| Before and/or After School Care | 4.5% |
| Other | 1.7% |

* Percentages total more than 100 because some nurses used more than one type of care.

'Informal care' (e.g., family member, baby sitter) was again the most common type of child care chosen by nurses, followed by long day care. Forty per cent of the nurses had one child receiving care; a half of them had two children in care; and, 24 nurses had three or more children in child care.

Cost of Child Care: Table 5 details the fortnightly child care costs for the nurses. The majority of nurses spent less than $200 per fortnight on child care.

Table 5: Costs of Child Care Used by Nurses with Children Employed by the WSAHS

| Costs of Child Care Each Fortnight | % of Nurses in this Category |
|---|---|
| No costs involved | 20.0% |
| Up to $50 | 22.7% |
| Between $50 and $100 | 26.9% |
| Between $100 and $150 | 16.9% |
| Between $150 and $200 | 7.6% |
| More than $200 | 5.4% |

Thirteen per cent of the nurses using child care received a subsidy, although only 17 per cent of the nurses who had children in child care had ever applied for a subsidy. For 80 per cent of the nurses, less than one quarter of their income went on meeting the costs of child care. However, in both the interviews and questionnaire responses, most of the nurses generally commented that they thought child care costs were too expensive:

> *Child care costs are too expensive once you have more than one child. I pay $20 per day and if I worked full-time with my two children it would cost $400 per fortnight - at least one third of a full-time wage. It seems hardly worth it. This is the reason why I don't work full-time.*
> [Clinical Nurse Specialist]

> *It's costing $387 per fortnight for my children. I mean that's expensive. The Centre is open for 49 weeks of the*

> *year and you pay for 49 weeks whether you use it or not and that includes public holidays, your holidays and whether you're sick or the children are sick.*
> [Registered Nurse - Interview]

> *I feel I pay a large amount on child care. Two of the four days I work go directly to paying for child care.*
> [Nursing Unit Manager]

> *To obtain child care, I am forced to work set hours and therefore my wages are lower without any shift penalties. This means a large proportion of my income is spent on child care. When you have more than one child, as I have, you work simply to pay for child care costs!*
> [Registered Nurse - Interview]

Problems Obtaining Suitable Child Care: Sixty per cent of the nurses using child care said they had problems obtaining suitable care for their children and a number gave reasons for this:

> *Actually obtaining child care places in Western Sydney for two children under three is impossible.*
> [Registered Nurse]

> *The main problem is the waiting period. To book a child for day care in the area where I work you have to wait for years.*
> [Registered Nurse - Interview]

> *Getting child care for the under two age group during normal working hours is almost an impossibility.*
> [Research Nurse]

> *I don't like working from nine to five. It's not my preference. But you try and get someone to look after a child until 11.30 at night. It just doesn't happen.*
> [Registered Nurse - Interview]

Twenty eight per cent of those nurses who used either formal or informal child care commented that they experienced problems with their current arrangements. These problems were wide-ranging as the following anecdotes demonstrate:

> *I have to work at my present Hospital because it is only five minutes from home. I have to work at night because my children are under five years and I am the primary care giver. I sleep between the hours my husband gets home from work and my starting time. Everything has to run like clockwork, otherwise we have problems.*
> [Registered Nurse - Interview]

> *With my occasional care centre, bookings can only be made one week in advance. I often miss out because I am the last one to book because I have to work when the bookings are made.*
>
> [Clinical Nurse Specialist]

> *Mum minds the children while I work, but I can't expect her to do much for the kids. She's a bit old. All she can provide is companionship for them.*
>
> [Registered Nurse]

> *It's virtually impossible to use my baby sitter because I am now on a rotating roster.*
>
> [Registered Nurse]

> *I am supposed to start work at 7.00am. So, I have to look for child care between 7.00 and 7.30 because the Centre doesn't open until 7.30.*
>
> [Registered Nurse - Interview]

For most of the nurses, any problems they may have had with their current child care arrangements were compounded when their children were sick. Fifty five per cent of the nurses indicated they take time off work to care for sick children and a further one third said they 'occasionally' took time off for a sick child. Some commented why this was necessary:

> *If the kids are sick they are not accepted by the day care centre. The only option I have is to stay at home with them until they are better.*
>
> [Clinical Nurse Consultant]

> *If the children are sick, the first thing I do is panic. We still have to pay for child care and I also have to take a day off work.*
>
> [Registered Nurse - Interview]

> *When my baby is sick or when my mother-in-law who cares for her is sick, I cancel my shift.*
>
> [Registered Nurse - Interview]

> *I really can't go to work and leave the children with the baby sitter if they are not feeling well. This is when they really need their mother.*
>
> [Registered Nurse]

The Influence of Child Care on Career Decisions: Child care issues had a significant effect on the nurses' decisions about their career. Two thirds of the sub-sample remarked that having children had influenced their careers:

> *Let's face it - kids stuff-up your career as a nurse. To*

> *pick up nursing after seven years off is really difficult. I needed child care, but it's too late now. It's after school care that I have to look for now.*
>
> [Registered Nurse - Interview]

> *Because of children I can only work part-time. This has set back my goal to become a Clinical Nurse Specialist. I miss out on being able to go to seminars. I feel I do not get an equal chance with the full timers to do the management and inter-Hospital courses.*
>
> [Registered Nurse]

> *I have never been able to complete any further training due to the unavailability of child care for the children.*
>
> [Registered Nurse]

Nearly one in every two nurses commented that their career intentions over the coming 12 months would be influenced by considerations of child care. The reasons they gave varied considerably. Two examples were:

> *If I lose my baby sitter I have lost my career. There would be no way that I could find a replacement whom I could feel secure with.*
>
> [Registered Nurse]

> *I will be moving to a new housing estate. If a child care facility there is not available then I'll probably work only when my husband can take care of the children, if he's willing to ...*
>
> [Registered Nurse - Interview]

Provision of Child Care and Remaining in Employment: The nurses were asked for their views about whether the Area Health Service and/or Hospitals had a responsibility to provide child care for nurses. In analysing the replies, the responses from the 648 nurses (rather than just the 489 who had children living with them) were considered.

Four in every five of the nurses commented that the Hospitals and/or the Area Health Service did have a responsibility, in their view, to provide child care for nurses. The types of child care most needed by nurses were those outlined in Table 6 overleaf, where it is clear that extended hours care was considered the most appropriate by them.

Table 6: Types of Child Care Most Needed by Nurses Employed by the WSAHS

| Types of Child Care Most Needed | % Nurses Identifying this Type* |
|---|---|
| Extended Hours Care | 75.4% |
| Holiday/Vacation Care | 33.3% |
| Before and/or After School Care | 31.9% |
| Long Day Care | 27.6% |
| Occasional/Emergency Care | 26.3% |

* Percentages total more than 100 because some nurses identified more than one type of care.

When asked, "If child care was provided by the Area Health Service and/or the Hospitals, would you use it if it was not subsidised?", 51 per cent of the nurses indicated they would; 16 per cent said 'No'; and, the remainder (33 per cent) were unsure.

Finally, 96 per cent of the nurses indicated that if child care was made available, by the Area Health Service and/or the Hospitals, then it would have a positive effect, as the following comments show:

> *If child care was more freely available to nurses, I'd be able to work the shifts I wanted. The fact that child care would be nearby would free me of the worry of whether the child was getting good care.*
>
> [Registered Nurse]

> *If I could get Hospital-based care I would be able to work more days during the week. This would really strengthen my career and make working at this Hospital so much more worthwhile.*
>
> [Registered Nurse]

> *If your child is well looked after and you're happy and secure about this, then it is easier to commit yourself to your job and the Hospital. It would be great if the Hospital provided suitable and affordable child care. It would have such a positive impact on the nurses with children at this Hospital.*
>
> [Nursing Unit Manager]

## Conclusion

Overall, this study has indicated thus far that nurses are concerned about the level of child care that is available to them. Many have to rearrange their work commitments in order to ensure the well-being of their children. For those without closely-knit support groups, care of their children may be by telephone mode during breaks from the ward. These nurses represent one group of shiftworking women for whom quality of care has been subverted by the quantity of childcare places that are available. Alternatively, the specialist skills of these women, developed over years of education, undergraduate and postgraduate, is being lost because of their perception of their responsibility of being the prime care-giver to their children.

A commitment to improvement in the quantity of quality child care places must facilitate a reduction in the rate that nursing skills are being lost to the industry; an improvement in child care availability; an improvement in the life styles of these women and a better chance for *quality* of opportunity for their children.

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Prepared by Sarah-Eve Farquhar for panel (C Wylie, A Meade, S Farquhar) on "The Role of Research into the ingredients of Quality: Early Childhood Provision in Policy-Making and Industrial Relations" at the Fifth Early Childhood Convention, Dunedin, 8 - 12 Sept 1991.

# Ingredients of Child Care Education Quality which may be affected by Policy Decisions

**PROTECT CHILDREN'S INTERESTS** **PROMOTE CHILD DEVELOPMENT** **MACRO**
**DEVELOPMENT**

**Child Health**
Hygiene policies & practices
Facilities for sick children
Physical needs met (food, adequate sleep, changing, potty/toilet, and washing facilities, ventilation, room temperature, etc)
**Child Safety**
Fenced area, off the road
Safe building (e.g. one storey for children under 3 yrs; safety plugs in electrical sockets)
Protection in case of emergencies (e.g. fire-proof doors, quick access to outdoors, strong building frame, established emergency procedures)
Constant adult supervision
Safe movement (e.g. clear pathways between areas, not cluttered; ease of access for children with physical disabilities)
Safe environment (e.g. soft surfaces under climbing objects; sandpits covered when not in use)
**Child Happiness**
Soft surfaces (e.g. grass to sit/ roll on, adults laps)
Sufficient toys and playthings
Sufficient space/not overcrowded

**Adult-Child Ratio**
**Size of Children's Group**
**Mixed Age-Grouping**
**Trained Staff**
**Continuity in Staffing** (low turnover)
**Quality Activities** (age stimulating, culturally and individually appropriate)
**Programme with Educational Objectives**
**Parent Involvement** (in programme and decision-making)
**On-going Assessment and Evaluation** (e.g. children's needs, quality of their experiences, goal assessment and evaluation, staff behaviour).

**Cultural** (aspirations, goals, views & definition of good-quality)
**Public - Feminist, Family, Business and Community** (affordable, good choice of services, convenient hours and location, goals such as school preparation or second language teaching or, appropriate social role behaviour)
**CCE Field - Staff Development, Professional Associations, Cohesion and Co-ordination between services** (setting and monitoring of own standards, advocacy)

POLICY RECOGNITION THAT CCE IS A PUBLIC RESPONSIBILITY -> essential and strength of is increasingly important in the quest for higher quality CCE
MONEY-> increasingly important that there be no need trade-offs between quality and cost.
REGULATIONS TO ENSURE FLOOR OF QUALITY -> importance lessens when centres in compliance.
Danger of over-regulation to ensure uniform excellence at expense of special character.
TRADE-UNION LAWS -> protection and promotion of staff interests becomes more important
FISCAL MECHANISMS (accountability e.g. charters) becomes less important
PRE- & IN-SERVICE TRAINING (provision and quality) becomes more important

Some ingredients of good-quality which can't or may be indirectly affected by government policy: peer group stability, staff personality and quality of personal interactions/relations with children and families/staff/management, continuity in staffing through staff rosters

## Ingredients of Child Care Education Quality which may be affected by Industrial Awards

**PROTECT CHILDREN'S INTERESTS**

**Child Health**
(relieving staff available, staff sick day provisions, policy on staff health help e.g. vaccinations, lice checks)

**PROMOTE CHILD DEVELOPMENT**

**Continuity of Care**
(promote stability through job security; factors related to job satisfaction)

**Trained Staff**
(wages reflect training status and provide incentive for higher levels of training; financial assistance with costs and leave provisions)

**Staff Effectiveness**
(related to staff happiness, commitment to work, and recognition of the demands of their work - influenced by level of staff wages, fringe benefits, holiday and family and sick leave provisions, systems to prevent burnout such as joint staff-management meetings, provision of staff room, adequate meal and work breaks during the day, light duties when pregnant, etc)

**MACRO DEVELOPMENT**

**Equity**
(staff selection policy and insurance of non-discrimanation in staffing policies and management practices)

**CCE Field Development**
(wage equity across services; union membership which can provide opportunities to become more articulate of professional and field needs, and engage in advocacy).

**Trained Staff** are linked to other components of quality,and particularly to:

(i) the level of parent involvement,

(ii) provision and choice of equipment and activities,

(iii) self-conscious practice, ability to use assessment and evaluation information to further programme quality.

**Staff wages** are probably the most important predictor of the quality of child care education, among the adult-work environment variables (See C. Gardiner, comments on this in his "Review of Early Childhood Funding: Independent Report", May 1991)

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# Quality aspects of Swedish family day care and center care.

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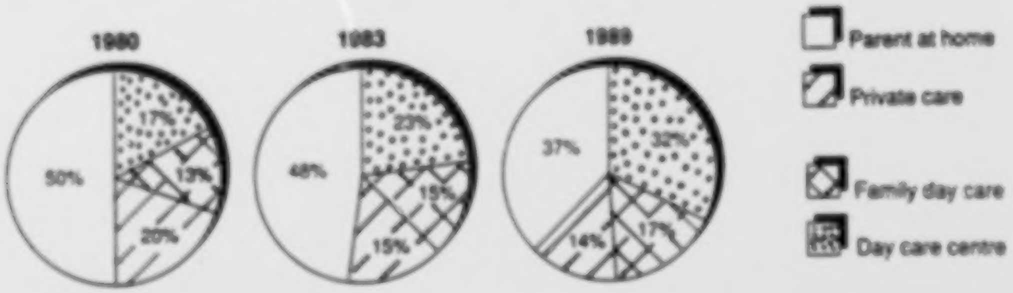
## Swedish child care

In 1990 87% of all Swedish women with children below the age of seven work outside the home (5). Although an unusually large number work parttime, there is very high demands for child care.

Sweden has about 8.6 million inhabitants of which 765 000 are children between zero to six (9). In 1990 49 % of all children between 4 months -6 years with working parents were placed in municipal center or family care regulated by governmental policy. For children 7-12 years old there are leisure time centers or family day care. The number of enrolled children 0-2 years old were 29%, for 3-6 years 64% and for 7-9 years 48 %. This figure drops to 7% for the older age group of 10-12 years old (14). Two times more of the children in municipal care were in center care than in family day care. Only 9 % of the children are in private out of home care (13). This means that society has assumed a major responsibility for ensuring that out of home care is available for families with children over 1 1/2 years of age with working or studying parents.( See figure 1)

Child care, children aged 0–6 years, 1980, 1983 and 1989, percent



There is a socio-demographic variation in usage of municipal day care (14). About 10% of preschool children live in single parent families. 20 % of the municipal cared children come from a single parent family. Most single parents are employed,and their children are much more likely to receive municipal day care, particularly in nurseries, because their children are given priority in admission to nurseries. Almost 90% of single parents have their 0-6 years old children enrolled in municipal care.

There is also a clear connection between parents' educational and occupational levels and their use of day care. More white collar workers than blue collar workers use municipal care, and this connection is most evident for small children. Anderson (1) found that 50% of 1-2 years olds and 48 % of 2-3 years olds with working-class parents were cared for in their own homes, whereas for children from middle-class homes the figures were 35% and 29% respectively.

Sweden has today extensive and still growing day care services. Day care services, together with parental insurance, are an integral part of a larger system which comprises a number of measures aimed at improving conditions for children and parents.

In Sweden there are now more than 11 000 units for child care and a staff of 82 000 persons. The size of this sector is as big as the size of agriculture. In the view of the national authorities , day care is a right that ,in principle, may be enjoyed by all children if parents so wish. Thus financing public child care is divided between state , municipality and parents. Considering day care as a right of children, leads to the consequence that public funds finance most of the day care cost. The State's share of cost is covered by the " child care charge" a part of the social insurance contribution that all employers have to pay; at present this " charge" equals 2,2 % of employers' total salary budgets. Municipalities' day care costs are met from municipal taxes levied on companies and individuals, though none of this tax is earmarked for daycare. A family with an average income pays approximately 10% of its disposable income after tax if it has one child in municipal day care. If the family has two or more children cared for , the total charge is only marginally higher. There are large differences in this average figure between municipalities. Both income -related and standard charges are common, as municipalities are free to decide the level of charges and how charges are determined.

Table 1 Cost distribution of public child care. Average annual cost per child in US $ and percent (1988)

| | State subsidies | Parental Fees* | Municipality (net costs) | Total costs |
|---|---|---|---|---|
| Day care center | 44% | 12% | 44% | 11300 |
| Part time group | 13% | | 87% | 2600 |
| Family day care | 25% | 15% | 60% | 6650 |

* Vary according to municipality and parental income.
Source : Swedish Association of Local Authorities

The total cost of day care is about 30 billion SEK per year ( 5 billion $) in the financial year 1990-91 and this is around 2 % of our Gross National product. Parents insurance and child allowance together cost about the same as child care. This means that 4 % of the Swedish Gross National product goes to the children.(13)

**The current system of day care provision.**

Child care services in Sweden take a number of different forms. Preschool (förskola) is the general term used to denote nurseries or day-care centers(daghem), kindergartens or part-time groups (deltidförskola) and mothers clubs or open preschools. (See figure 2)

In daycare centers children usually receive full time care. The centers are usually open between 6.30 in the morning and 18.00 in the evening, Monday to Friday all year round. Children are divided into infant groups (0-3), sibling groups 2.5 to 6 years or extended sibling groups 1,5-12 years old.

Size and structure of children's groups at day care centres

| | | Age | Number of children | Staff ratio |
|---|---|---|---|---|
| | infant group | 1-3 years | 10-12 children | 2 full-time staff members per 5 children |
| | sibling group | 3-6 years | 15-18 children | 1 full-time staff member per 5 children |
| | extended sibling group | 1-12 years | 15-18 children | same as infant or sibling groups |

The average day care center has four groups or sections, each with some 12- 20 children. Each section usually has three members of staff, two pre-school teachers and one child care attendant. Leisure time centers are for schoolchildren aged 7-12 and are open before and after school as well as during school holidays. Two recreation instructors usually work with groups of 15-20 children. Recently the mixed age groups and extended sibling groups have decreased in popularity. Both the children below three and the six year olds are considered not to bee cared for in the best way in groups with very different ages. Grouping according to age has again, specially for children below three and more than seven, become the rule. (Sundell- Johansson 1991)

Family day care is the system by which the municipality employs family daycarers. The municipality pays the daycarers directly and the parents pay the municipality. To get a full salary the daycarers have to look after four children full time. As most day care centers only admit full time care, the amount of part time care with the daycarers is high. Often they take care of 8-10 part time children. On average the daycarer is responsible for 6.4 children, including her own. 40 % of municipal care is family day care (7,10).

The Swedish parliament legislates in matters concerning the aims: expansion and financing of child care. The National Board of Health and Welfare and the county administrations are together responsible for supervising the preschool and other forms of childcare nationwide. This involves for example dissemination of information, providing guidance, helping to develop skills, following up the quality and contents of the work of the preschool, and the planned expansion of services.

**Pedagogic programs for preschool and leisure time centers.**

In 1987 the National board of Health and Welfare published a "Pre-school Educational program" (8), in 1988 a similar program appeared for the leisure time centers. These programs "should also be seen as a guide for other child care for children as regards goals and orientation" which means that municipal family day care homes also are covered by the programs.

The aims behind these programs are to achieve good ,even quality, to stimulate development and to facilitate planning, supervision and evaluation of day care. From "The Preschool Educational program" the tasks of the Swedish pre-school can be summarized as follows:

- "Pre-schools should offer goal oriented and planned educational activities".
- * In pre-school, the children should be given good, secure and loving care and companionship, be given the support necessary to develop their personalities and social and intellectual competence; they should acquire greater knowledge of themselves and the world around them and be instilled with democratic values."
- "Pre-school exists for all children but has a particular responsibility for children who need special help in order to develop."
- "Pre-schools should be a complement to the home and the children's social and cultural environment in general and enable parents to combine parenthood and family life with work or studies. Its activities should be planned in close cooperation with the parents". ('Pre-school educational Program', p.12).

As child care in Sweden is the responsibility of the Board of Health and Welfare, day care services have always been more connected with and influenced by ideas and values in the health sector than by goals in the formal school sector. It is interesting to see that the preschool program presents an educational role as child care's first task. In the discussion of number of staff and group size the opinion is common that in order to be able to both stimulate the children intellectually and give them safe and secure care the groups ought to be smaller and more staff is wanted.

The Social Welfare Board in each municipality is responsible for expansion and organization ( of day care services and for implementing overall goals and orientation). The Swedish Parliament has decided that municipal guidelines for educational activities in preschool should be drawn up in each municipality. The municipalities are supposed to translate the general guidelines into their own specific programs. This means that the responsibility for day care has shifted from national to local level. From the 1980's the state gives more of general guidelines combined with support for research and development.

One of the consequences of Sweden's national family policy is a remarkable homogeneity of Swedish day care. This homogeneity is of special importance for questions of quality.

The formal aspects of quality in child care are regulated by conditions for State grants to municipalities, and by advice and directives issued by the National Board of Health and Welfare. The regulations are very detailed, there are rules about minimum area per children, how the premises should be planned, how the furniture and equipment should be designed etc.

Daycarers as well as center care workers are supposed to follow the central guidelines issued by the National Board. Childminding schemes are regulated and controlled in the same way as nurseries. A municipally employed childminding assistant has the responsibility to investigate , assess and choose daycarers; place children; provide daycarers with advice and support; organize, coordinate and develop activities for daycarers and children. Groups of daycarers work together and meet at least once a week in special premises or in open preschool. During these meetings games and activities are organized. Since the children get to know each other and also other daycarers, it becomes easier for the daycarers to substitute for each other. The quality of this form of care has increased very much due to supervision of the childminding assistants.

## Staff training

The training for pre-school teachers and recreation instructors takes the form of university courses of two and a half years' duration. Child care attendants are trained on special two-year programs in the upper secondary school. Also for daycarers a training of 100 hours introductory course is required.

National Board require that half the staff in each group in center care must be pre-school teachers and half child care attendants. Due to shortage of teachers, many " toddler groups" have only one teacher and three attendants. Each center also has a supervisor who is a qualified pre-school teacher, and a cook and assistants to clean and perform kitchen work.

## The meaning of quality

Quality could be seen from different perspectives.

* High Quality means the possibility of fulfilling the goals set for child care,
* it also means that parents get support in their parental role
* and that the children are afforded the possibility of stimulation for their development.

Quality could be devided into at least two dimensions. External or structural and internal or dynamic factors. Reports dealing with quality aspects of child care usually discuss structural factors as group size, child to adult ratio, age range and how many hours the children spend in day care. Also factors as training the staff is discussed. In Sweden we have a comparable high quality on structural factors due to our state regulated child care.

Among the dynamic factors the goals of the staff,their consciousness of the educational work, their pedagogical methods, their attitudes as well as the content in the care are important to analyze. Those results could be used in a discussion about which type of care ought to be supported by the state, and as a help for parents if they have the possibility of choosing the type of care for their children.

The homogeneity of Swedish child care enables researchers to control some of the factors that otherwise would have to be dealt with as independent variables in the research design.

To answer the question what happens in the day care groups when the child/staff ratio decrease a study trying to combine structural and dynamic quality factors have been conducted. The subjects were 20 employees and 64 parents in 6 daycare centers (13).

In the day care study during a period equal to 5 weeks a total of 6312 observational units of staffs activities, social interaction and staff/children ratios were collected. The staff was interviewed about work experience, length of employment and attitudes to different aspects of their work. Parents were given questionnaires about attitudes to and experiences of the child care system.

Data was analyzed according to two questions. Are variations in the content and type of activities and type of social interaction among staff members related to variations in child/staff ratio? Do differences in activity contents and patterns have any impact on standards of quality in the overall activities in the groups?

In all six day care groups the most common activity of the employer was basic care as rest, dressing, changing diapers and meals (22-39% of the total time observed). When comparing the time spent on basic care, it was evident that groups with comparable more children below three had a greater proportion of this activity. Pedagogical activities as playing, reading stories, singing and group activities (9-30% of the observed time) as well as preparation of meals and activities, together with cleaning (13 to 20% of the time) were also common activities. Often (8-34%) the staff were "together with the children", giving body contact and talking to them. The employers also had breaks (2-18%) or talked (5-8%) to parents or colleagues.

Concerning the pattern of social interaction, the overall picture revealed that 49% of the observed units, two or more staff members together interacted with the children. 35% of the time the employee interacted solely with the children and 15% there was no interaction with children.

Most of the interviewed expressed a positive attitude to their work and agreed that the most important task is to create a safe, warm, and friendly atmosphere for the children. Some differences across the units were found, especially in questions concerning basic attitudes towards their own working team and the way one should deal with conflicts, private problems, cooperation etc. As the working situation at an organizational level as well as in the day to day activities demand teamwork, this fact is important to consider.

The results were summarized in a model, based on important components in the constructs of quality. The model extracts some of the variables which found to be important contributors to the way a pattern of activities and social interactions were formed in the studied center units.

Figure 2 Model of factors important for quality in day care

| Factor | Group A | Group B | Group C |
|---|---|---|---|
| Caregiver/ child ratio | High (*) | High (*) | Low (*) |
| Working goal | Unsure | Solidarity | Education |
| Working style | Discordant | Concordant | Concordant |
| Social interact. | >3 adults<br>2-3 children | 2 adults/<br>>3 children | one adult/<br>>3 children |
| Activity | Low structure<br>Passive | Medium structure<br>Support | High struct.<br>Educational |
| Parent attitude | Displeased | Pleased | Satisfied |

(*) high is 15 children and 3 adults , low is 19 children and 3 adults.

From an international perspective the enrolled child/adult ratio is very favorable, from a Swedish perspective only five children per adult is according to the recommendations given by the National board. It was suggested, that there is a critical ratio when the possibility of adding developmental activities to the necessary ones as caring and watching is decreased. Exactly what this critical ratio is depends on the staff teams' way of organizing their work, their motivation to cooperate and their sense of unity. In units with the same child/staff ratio, but with different levels of consensus in the staff group, there were considerable variations in social interactions and activities. According to this study variations in observed patterns of activities and social interactions could not be explained only by referring to variations in child/staff ratio. More adults per children increased child-oriented activities and close interaction with the children only if the staff agreed on goals and methods in their work.

**Quality factors in family day care**

40 % of municipal child care in Sweden is family day care. The high proportion motivates an analysis of family daycare activities. Family day care home's often are situated close to the homes of the children in their neighborhood environment. The children spend their day in a home environment and take part in different home activities. This gives an opportunity to learn about regular activities in an ordinary environment. The smaller group size might give the child special opportunity for care and attention. The closeness to parents increase the possibility for natural contact between parents and daycarers. The parents need only to deal with one person.

In this study of family day care the design was similar to the center care study. The activity pattern of the daycarers, the social interactions between adults and children, the attitudes of the daycarers to their job and the parents attitudes to the care of their children were analyzed (11).

There are special difficulties in the study of family day care as the uniqueness of the home environment and the influence of the personal factor of the careprovider. But there are still some important general features to consider.

29 daycarers and 110 parents were observed and/or interviewed in the same way as the staff in the project above. The mean number of children cared for was 7.4. 20 560 minutes were observed. The observation period is equal to 2 months of working time (11).

During the observation period the mean caregiver child ratio was 4,1. The daycarers interacted socially 75% of the observed period. Most frequently (27%) the daycarer interacted with 2 or 3 children. 85% of total time was spent on care preparations, pedagogical activities, being together and passive activities.

According to observation data the daycarers are able to stimulate and interact with the children during 2/3 of the time when they are dealing with activities as cleaning and cooking.

Most daycarers give the children opportunity to take responsibility in such activities as laying the table and cleaning up. They also produce useful things such as cookies or different handicraft. Once a week half of the daycarers and their children take part in physical group activities and every second week 2/3 of them visit museums, libraries or theaters.

According to this study daycarers and parents express their satisfaction with the situation. The structural quality aspects are compared to daycare center's smaller groups and lower adult to child ratios.

### Comparison of quality factors in center care and family day care.

Both politicians who have to decide on what to expand, center or family care and parents need to know what type of care would suit best. When center care and family care are compared, are the dynamic aspects of quality of care different and what are these differences? First we will compare background factors in family care and center care.

According to table 2 and 3 there are more toddlers present in center daycare and more schoolchildren in family daycare. When we compare the age of the adults it is seen that the staff in daycare centers are mostly between 20 and 30 years old and younger than most daycarers , who most are between 30 and 50 years old.

When the children to adult ratios were compared it was found that there were two more children present per adult in family care than in center care.

Table 2 Age of the children in center care and in family day care

| | Daycare centers | Family day care |
|---|---|---|
| toddlers | 28 % <3 years | 16 % <4 years |
| preschool children | 55 % 3-7 years | 49 % 4-7 years |
| schoolchildren | 17 % 7-12 years | 36 % 7-12 years |

Table 3 Center care staff's and daycarers' distribution of age in percent and frequency.

| Age | 20-30 | 31-40 | 41-50 | >50 |
|---|---|---|---|---|
| Center staff | 80% (16) | 15% (3) | 5% (1) | - |
| Daycarers | 11% (3) | 39% (11) | 32% (9) | 18% (5) |

The patterns of social interaction differ in family day care and center care. From table 4 and figure 3 we see that daycarers work alone with a small grop of children ( 65%), while in day care centers the adults work together and take responsibility alone for children in 35% of observed time.

Table 4 Pattern of social interaction between children and adults and between adults for day care centers and family day care.

| Interaction pattern | Center care | Family day care |
|---|---|---|
| 1 adult 0 children | 7% | 16% |
| 1 adult 1 child | 11% | 19% |
| 1 adult 2-3 children | 12% | 27% |
| 1 adult > 3 children | 12% | 19% |
| | | |
| Several adults 0 children | 8% | 9% |
| Several adults 1-3 children | 12% | 7% |
| Several adults > 3 children | 37% | 3% |

Figure 3
Dominant interaction pattern

| family day care | center care |
|---|---|
| * no interaction | * one or two adults interact with one or two children |
| * only childinteraction | |
| * interaction with one child | |
| * " " 2-3 children | * at least 3 adults interact with at least 3 children |
| * " " > 3 children | |

What we have seen so far are the differences in background, in adult /children ratios and interaction pattern. For quality also activity pattern is important. Differences in activity patterns are presented in table 5.

Table 5 Proportion of time for main activity categories.

| Activity category | Center care | Family Day care |
|---|---|---|
| Care | 30% | 30% |
| Preparations | 15% | 25% |
| Being together | 11% | 10% |
| Educational activities | 22% | 15% |
| Conversation to adults | 6% | 5% |

According to the table above there are some differences in the activity pattern. In center care more of the time is used in educational activities and in family care there is a higher proportion of preparations. Activities such as receiving or leaving children, meals, playing games, showing and instructing as well as being together are equally common in day care centers and in family day care.

In the interviews it appeared that daycarers were much more satisfied with their work than staff in child care centers.

Tabel 6 Comparison of work satisfaction beween daycarers and staff in child care centers.

| | satisfied<br>+++ | ++ | +- | dissatisfied<br>-- | --- |
|---|---|---|---|---|---|
| Center staff | | 1 | 17 | 2 | |
| Daycarers | 5 | 19 | 5 | | |

The study of the center staff was done during a period of change in their organization. This could explain their negative attitudes and could be an artefact. Apart from the obvious differences of age and circumstances of the two types of care. When the rules and norms for different activites were compared, amount of responsibility for the children, how often they make useful things, schoolpreparations, learning to sit quiet, and how much adults took part in the games of the children were equally common in center and family day care. In center care the children had more opportunity to experience cultural activities and study the work of adults, where as in family day care there were greater possibilities to play and construct without the intrusion of the adults, they also learnt more about the nature and had more of physical training.

Differences between family day care and center care are put together in a model presented below.

Figure 4. Differences between family day care and center care

| Family day care | Center care |
|---|---|
| * Realitybased | Simulated |
| * The daycarer decide by herself when and how to work | Joint planning of the staff<br>The result dependant on how similar their ideas are |
| * Activities are geared to parents timetable | Rutines independant of parents timetable |
| * Age varies between 1-12 years | Groups according to age |
| * Individualized care | Group care |
| * Consistency due to the same caregiver during a long period of time | Inconsistency if there are different ideas of childmanagement |
| * Closeness because of the private home atmosphere | Formal contacts |
| * More contact between parents and caregivers | Parents meet a group of staff and an "institution" |

A comparison of the above described results from studies of social interaction, activity patterns and attitudes in center and family care reveal that the similarities in social interaction, activity pattern and attitudes of the two caring forms are greater than the differences. This must be interpreted as a result dependant on two facts. Firstly center care as well as municipal family care are both carefully regulated by the "Preschool Educational program" issued from the National Board of Health and Welfare. Secondly the organization of daycarers into groups, which meet every week and are supervised by their special family day care assistant makes the daycarers understand and follow the program in the same way as center care staff do.

The difference in social interaction between family care and center care is the fact that daycarers work alone with children 65% of the time compared to 35% for employees in day care centers.

More of the daycarers express satisfaction with their work situation than staff persons in center care. Also parents expressed a higher degree of satisfaction with the care in family care than in center care.

Looking carefully at dynamic aspects of quality of care means that the attitudes of the employees and what they actually do together, how the educational guidelines are implemented, how sensitive the staff are to individual needs and characteristics, how well developed staff-parent cooperation etc.is are assessed.

Several of these dynamic quality factors have been discussed in this paper. Even if quality in relation to child development seems to be very good, several of the dynamic factors in the Swedish day care system need to be improved.

In Sweden for most people family day care has not the same good reputation as center care. Most persons think children are just present in the family day care home and that the daycarer is only cooking and cleaning.

The results presented in this paper were very far from the above picture. Of the different reasons for the good quality in family day care the quality of work of the supervisor seems to be most important.

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# QUALITY CONTROL IN PRIVATE NURSERIES IN BRITAIN

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This paper offers a description of private sector nurseries in Britain and attempts to regulate them. It looks at private nurseries which were opened in 1990, and records the views of those responsible for the registering and monitoring process and the views of the owners of the nursery on the starting-up process.

## Introduction

In Britain there has been a recent interest in women's labour because of a belated recognition of demographic change and a likely skills shortage. Until the late 1980s, the official government view about working mothers was that if they chose to work it was an entirely private arrangement and not one in which the state should be involved; and that the best professional advice was that young children should be at home with a mother or mother surrogate. Publicly funded provision (24% of children 3-5 in part-time nursery school; 1% of children in day nurseries) is either part-time or for highly stressed families; in either case working mothers have been discouraged from using the services. This official view is shifting and professional attitudes are slowly following suit. The government now acknowledges the need for women's labour, and recognises that some minimal intervention is necessary.

The government's response has been in two directions. It has exhorted employers to help meet their employees' childcare needs. 'Employers must cough up' (1) either directly by providing workplace nurseries; or indirectly, by offering fee relief or vouchers or some other subsidy for those seeking childcare in the private market. Secondly, official views about the best interests of the child have softened. The new Children Act, passed in 1989 to come into operation October 1991, reflects these professional ambiguities. The Act for the most part is concerned with prevention and treatment of child abuse, and children in care; but it also has a section on daycare for young children, which stresses the need for regulation and support of private sector daycare. It suggests daycare should be based on the following principles:

- children's welfare and development are paramount
- children should be treated and respected as individuals whose needs should be catered for
- parents' responsibility for their children should be recognised and respected
- parents are generally the first educators of their children; this should be reflected in the relationships with other carers and providers.

These elliptical statements draw on a body of assumptions about childcare which are not articulated in the Act or in the guidance notes which accompany it. Nor are there any legal specifications for standards to implement the Act, save in three areas - staff-child ratios, space requirements, and respect for race and culture. The ratios and space requirements are as follows:

| Staff-child ratios: | |
|---|---|
| 0-2 years | 1:3 |
| 2-3 years | 1:4 |
| 3-5 years | 1:8 |

| Space: | |
|---|---|
| 0-2 years | 3.7 sq metres per child |
| 2-3 years | 2.8 sq metres per child |
| 3-5 yrs | 2.3 sq metres per child. |

The Act also specifies that due regard must be paid to the ethnic origin, culture and religion of the families seeking daycare, and failure to do so may result in a refusal of registration. (This section, the most radical in the Act, was the fruit of intensive lobbying by the Commission for Racial Equality and assorted advocacy groups.)

Everything else is discretionary. Local authorities may issue guidelines on issues of staff training, curriculum, meals, observation and record keeping etc. but, as before, the legal status of the guidelines issued by local authorities is in doubt. If they are flouted, it is not clear what pressure the authority can bring to bear.

Each local authority must inspect each premises where children are looked after annually, and the owner or tenant of the premises must pay for an inspection fee. However there is little money to implement the Act, and most local authorities' abilities to mount inspections are insignificant.

The study reported here looked at four local authorities: one inner city, one suburban, and two rural (London was deliberately excluded), to see how they were coping with the Act. The study was carried out in 1990, that is after the Act had been introduced, but before it had become law. It looked at both sides of the equation: what those people in the local authorities responsible for registration were doing in respect of private daycare; and also how and why new private nurseries were being opened, and how their owners viewed local authorities.

## Methodology

A questionnaire was sent to all persons responsible for registering private daycare facilities in the four local authorities, asking for details about any nurseries which opened in 1990. The respondents were asked to rate the nurseries on a scale 1-5 on a number of key factors: care of babies, curriculum and activities, indoor and outdoor space, quality of staffing. Finally the respondents were asked to comment on the registration process itself, and their opinions of it.

Details were returned for 71 new nurseries. Visits were made to 30 of these. In each case the researcher was accompanied by the local authority representative and, because access was difficult, there were no formal interviews, only informal questions put to the owners or owners' representatives. These questions covered the starting-up process and the difficulties involved in it.

## Results

In all four authorities there had been a rapid expansion of private day nurseries, from 100 to 200%. This appeared to confirm a national trend of expansion, in so far as national figures are reliable (there are often problems of collection and nomenclature of national data). This expansion was more marked in the affluent south east of England.

Those responsible for registration frequently expressed disquiet about the procedures. Many of the workers had been in post some time, and had been recruited for work with playgroups and child minders rather than for daycare. They had accepted the 'professional' view that nurseries were bad for young children. Consequently, nurseries were sometimes discouraged from taking young children, or else required to operate on higher ratios than the law suggests is necessary, or to make extra adaptations to the premises. The fact that the changes had been endorsed by the government was additionally confusing, given the tone of previous government circulars about the dangers of daycare.

They also felt uncomfortable with the idea that they were supporting enterprises making 'a profit' out of young children. Services for young children, such as playgroups, have always operated on the breadline. Business procedures, drawing up business plans, accounting, taking out loans, calculating profit margins etc. were not processes with which they were familiar, and to which they were sometimes ideologically hostile. They saw their service as advisers on the registration process as being offered free of charge, to people who were then going to 'make money'; also whilst commercial 'consultancy' firms could offer a similar advisory service and charge as they saw fit.

No training had been made available, and no new staff had been appointed during the period of the study, to deal with the expansion or the change in emphasis of the provision.

Almost all the nurseries in the study were individual private businesses. Only a small percentage were workplace nurseries run either by a company or by an employer. Outside these company nurseries, employer contributions in any form - vouchers, fee subsidies etc. - did not exist.

Of the nurseries visited, the owners were mainly refugees from the state system, that is, previously employees in council-run day nurseries or nursery schools, who decided 'to make a go of it'. Often they felt they had not been given enough scope or freedom in the state system, particularly if they were nursery nurses; or they did not like working for someone else. They had typically been influenced by news reports of a shortage of places for childcare for working women, and felt that the demand existed for the services they could offer. 'This place was crying out for a nursery'.

The nursery owners were small businesses, and faced all the problems of a small business in getting started. In order to raise capital - setting up a nursery is usually capital-intensive - they had to take out loans, remortgage their homes, or borrow from relatives. Banks and business advisers were unfamiliar with the field and could give very little appropriate advice. Frequently business plans had under-estimated the time it took to attract and admit children. Planning permission was often very difficult to obtain and, in any case, because of the vagaries of local government in Britain, had to be obtained from a different authority (the district) than the registering authority. There was no reliable consistency between local authorities and local planning authorities in the advice that they gave. Not surprisingly, many of the owners described their first few months as a nightmare: 'I couldn't sleep, I couldn't eat, the doctor put me on tranquillizers'.

The majority of nurseries in the study offered between 20-30 places, although the range was from 10 places to 80. Most of the nurseries offered part-time as well as full-time places, to accommodate parents' working hours. Over 60% of the nurseries took babies.

Most of the staff in the nurseries were NNED (nursery nurses with two years' post-16 vocational training) or else untrained. There were very few teachers, only 9 in the whole sample, of whom half were the owners. Only the nursery supervisor and her deputy were likely to be experienced and have previous experience of working in a nursery. There were few auxiliary staff; much of the cleaning, cooking and janitation was undertaken by the owner and her staff. There appeared to be a high staff turnover. Almost all the nurseries in the sample had experienced staff turnover, even though they had not been open long. In many cases turnover was above 50% in less than a year. There were often no facilities for staff: no staff room or separate washroom. It was not possible to find out accurately about staff pay or benefits or conditions of service. Many staff appeared to be paid on hourly rates. Generally, wages seemed to be low, i.e. less than £3.50 per hour.

The majority of nurseries charged fees of between £50 and £70 per week, although the extremes were £15 (subsidised) to £90 per week. The users of these nurseries were almost all middle- to high-income families, frequently from professional backgrounds.

Few nurseries had curriculum policies or a planned curriculum, or even a wide range of activities. Very few were aware of the national curriculum (neither were their social service based advisers). Most nurseries made no mention of equity issues, race, gender or disability. Only one nursery in the sample, which was of a very high standard all round, took a child with a disability.

Premises in the inner city tended to be poor with little or no outside space. Other premises were converted domestic or office premises or, in a couple of cases, a converted factory and a converted nightclub. The quality of the conversion depended on purchase or rental costs and the capital available. Purpose-built premises were unusual, although in two cases the nurseries had been specially designed with great attention to detail.

One of the company nurseries stressed its food and nutrition policies as a selling point, but otherwise the issue tended to be ignored. 'They won't eat anything except fish fingers and sausages', was one owner's view. Some nurseries had dispensed with food, and children brought packed lunches.

Very few nurseries had access to inservice training. The local authority was usually split between care and education, and the training it offered to its own staff, so admitting private nursery staff was doubly difficult. Some attempts had been made to offer courses on child abuse. Many nurseries saw the lack of training, particularly on the national curriculum, as a drawback, and would have bought in packages if they had been available. However, few nurseries were staffed well enough to allow for flexibility of staffing and day release or cover for staff to attend training courses.

Within the nurseries there was an emphasis on 'customer satisfaction' in the sense that the nursery depended on their custom to survive. Getting known was problematic: in the owners' experiences most parents tended to rely on word of mouth before coming to a nursery. Advertising and open days did not appear to make a great deal of difference. Since there were no independent measures of a nursery's worth, other than basic registration, some unofficial recommendation from other parents appeared to be critical. About half the nurseries required their staff to wear some kind of uniform and, in a few cases, the children were also required to wear uniforms. Some nurseries had glossy presentation packs, and this and the uniforms suggested a concern with 'brand image'. However, few nurseries provided daily or weekly information sheets for parents, and indeed lacked the office facilities to do so.

## Conclusion

The results of the study appear to suggest that the private market is responding to perceived demand for childcare, but that setting up and running a nursery is too labour and capital intensive to be financially viable unless high fees are charged. Fee subsidy might make some difference but would not address the problems of capital investment.

The calibre and high turnover of staff is also problematic. Many nursery owners said that staffing was the most difficult issue that they had to face. In one local authority there was help with selection and interviewing of staff, but this was exceptional, and in any case has now been discontinued, paradoxically because of reorganisation to cope with the Children Act.

The lack of recognition of equity issues, the failure to address race or gender or disability issues, either in the curriculum or in admissions, is serious. Very few local authority nurseries, particularly those catering for ethnic minority communities, would make such omissions. The failure to admit children with disabilities is also a cause for concern.

The lack of liaison with education and the national curriculum is a problem, but one which exists in any case between social services and education provision.

Although there were some exceptions, and some outstanding care was offered in the private sector, much of the provision gives occasion for concern. The current inability of local authority staff to offer sufficient support, advice and inspection to such nurseries is also a matter of concern. The Children Act is intended to make a difference, but the lack of new funding to accompany it must leave doubts.

# BENDING AND BEATING BUREAUCRACY

(A presentation based on experiences during the period August 1988 to August 1991)

Jan Amer and Barbara Chapman
New Zealand Playcentre Federation

**Jan:** Bureaucracy - "a system of administration based upon organisation into bureaus", i.e. offices or agencies (Collins). Well, that sounds reasonable.

**Barbara:** Bureaucracy - alternative definition from Collins - "any administration in which action is impeded by unnecessary official procedures". Perhaps that is why we have identified the need to talk about bending or beating it. It seems we can't take it for granted that it will work for us. Do you remember the poem that came from that meeting where we first meet the "Early Childhood Management Handbook"?

**Jan:** Yes, I do, particularly.

"We'll fit in your scheme without too much fuss,
But honestly folks, your scheme should fit us."

That is a simple indicator of the difficulties that we have encountered through all the changes. We have openly acknowledged the benefits from some aspects of the reforms, but have found it very hard to understand why some of the really important features of Playcentre have been threatened.

**Barbara:** A letter to Dr Maris O'Rourke in October 1989 from me as President of Playcentre contains this statement,

> "An over-riding concern is for the future of what is important in Playcentre, i.e. - parents having responsibility for the provision of Early Childhood Education for their children in a system that provides extensive support and education for them, and recognises their parenting experience and skills."

**Jan:** That was an anxious time, when it looked as though that parenting component was not going to be recognised adequately, despite all the talk of empowering parents. It is sad that 22 months later, the pressures on parents in centres have not really let up. It looks as though a whole generation of playcentre parents will come through with increased political and administrative skills, but with so much pressure that they may not have had much time to spend playing with and enjoying their children. I didn't think that was what it was all about.

**Barbara:** Do you remember when we first heard we were appointed to the Implementation Working Parties? It seemed like a real blow for consultation and a bending of bureaucracy. It was also rather mind-bending for me as a volunteer in the education system, that the government was prepared to value my contribution so highly. I remember lots of listening, debating, long hours of talking round and through the issues, feeling pressured by some viewpoints, struggling to keep an element of flexibility in the outcome.

**Jan:** I felt much the same and for me it was also a time of vast learning and appreciation of the wider field of Early Childhood. I remember feeling a tremendous responsibility to ensure there was recognition and status given to parents' contributions to Early Childhood Education. It was my first major introduction to the bureaucratic machinery and I was quite awestruck by the mountains of paperwork that spewed forth day after day from unseen minions.

**Barbara:** We did a lot of waiting from the time that the working parties completed their work. This was difficult, as there had begun to be a build-up of interest in the field, a sort of nervous anticipation, and even those of us who had helped write the reports didn't know what was going to happen to all that work. That was a stage when I really had to question "the System", and whether it was there to serve our best interests. We in playcentre had a history of putting a case to government about the needs of playcentre and having it recognised, but here we were now, part of a bigger scene, knowing that we would have to make changes, but determined too that those important features of playcentre would not be lost.

**Jan:** That certainly came through at our special meeting in August 1989 didn't it, when we talked about the implications of the Management Handbook, and thought about action we could take over matters that were not in line with playcentre policy and philosophy. We also had time to benefit from the support that is available through the networking we are able to achieve in playcentre. This networking has been one of the key features in presenting our case to the bureaucrats.

**Barbara:** That started to be apparent soon after that meeting as the new agencies were established round the country, and began to feel their way amongst all that was going on. It must have been very difficult for people who had worked in the Department of Education to take off that hat one day, and put on a new one the next - Ministry, ERO, ECDU. However, it was also difficult for the people in the field who also had to adjust, and who were seeking answers to so many questions about licensing, chartering, Minimum Standards etc., while also trying to carry on with the important work of providing an Early Childhood service.

**Jan:** I remember the beginning of the flow of letters and phone calls so many of us working at Federation level started to receive, from people who were being bombarded with seemingly definitive statements, like

> "All centres will have to have dishwashers or sterilising sinks."
> "No centre in your association will pass minimum standards."
> "The Ministry can accept or reject Health and Fire Safety Reports."
> "As long as you have access to extra toilets it doesn't matter whether you ever have to use them."
> "Unless a centre has one qualified supervisor by . . . (a moving date, but always stated with certainty), it will be closed."
> "It is not our intention to force any centre to close."

No wonder confusion reigned, and centre people found it hard to get into the business of writing charters.

**Barbara:** Well, what a good thing it was that we recommended delaying tactics in some of these matters. There was criticism of us as a national body, at times, for slowing down or stalling centres, but as an organisation that has always had to be economical in its use of human and financial resources, we were reluctant to take steps that might later have to be retraced. I still believe we were right to say not to get into major expenditure before we knew what was to be required, nor to go ahead with charter writing before the Ministry had decided what a charter should be.

**Jan:** We could have waited even longer with that one, couldn't we, when you think of the size of the original working party report on charters, then the charter requirements in the Management Handbook, which were replaced in October 1990 by the much briefer "Desirable Goals and Objectives". It was hard to believe what we hard of some Ministry Districts pressuring centres to use this statement as their charter, with no input from the centre. What a long way that was from the intention that the parents/whanau of the centre should own the charter, and negotiate it with the Ministry.

**Barbara:** It was reassuring to learn that many insisted on retaining the charter they had prepared, even if they had in the end to concede a change of status for it. It all seemed rather like bureaucracy gone mad.

**Jan:** Barbara, you had some interesting and difficult experiences during 1989-90 didn't you?

**Barbara:** Yes, there were times when I wondered what is was all about. It didn't seem to have much to do with children and their families. The difficult times focussed round statements made by people in power, that seemed out of step with what was best - for example the minutes of a meeting between New Zealand Playcentre Federation and the Ministry in February 1990 state

> "The Minimum Standards, approved by Cabinet" are exactly that . . . Early Childhood centres have had sufficient time to reach these standards."
> ". . . the Ministry would require that one person in each playcentre holds a recognised training qualification. This will be a requirement for government funding as from July 1990."

**Jan:** That meeting was a bombshell wasn't it, and led to an attempt to get responses to matters raised in a meeting with the Minister the previous November. We also triggered off a letter-writing campaign at that time, targeting as many MPs as possible. I remember there were plenty of people who would have liked to hit the media in a big way, but you urged restraint, a form of passive resistance.

**Barbara:** I had the feeling that a media campaign would not, in the end, achieve as much as just worrying away at the issues to do with property and supervision that were the most important ones for us. We were having difficulty getting answers from the Minister and from the Ministry, but it seemed right to persist with those efforts, rather than launch a public attack. I had times of questioning the wisdom of that conviction, but, in the long term, feel it was right.

**Jan:** The letter-writing campaign did bring results in many associations - with MPs meeting with local Playcentre people, with questions being asked in the house, and all-in-all, plenty of useful information sharing. I believe there was a request from someone in the Ministry for us to ask centres not to write any more letters, as they were mostly referred to them for comment. That of course is the impact of a letter-writing campaign - not to annoy officials, but to impress on them that there are so many people looking for answers.

**Barbara:** Another interesting phase in the whole procedure, and one that turned out to be fun as well as information gathering, was our Loo survey, a response to a statement by a member of the Minister's staff saying that of course centres need more loos than schools, because when a child's got to go, he/she's got to go. We knew that in a 2½ hour session, loo use is minimal, so set up a survey of a selection of playcentres, in different locations - urban, rural, south, north, coastal, inland, high altitude, low altitude, and even Stewart Island. The findings didn't surprise us at all, but may have surprised some of the officials who received copies. Needless to say, the percentage usage of available time would have justified only one loo in most centres. This is a real example of failure to recognise the differences between sessional and full-day centres.

**Jan:** The episode does highlight the need to have accurate information when dealing with bureaucrats, doesn't it? It is one thing to tell them what we know, but quite another to furnish the facts, whether it be loo usage, or information about training, or an accurate assessment of the amount of work needed to bring centres up to standard. There are numerous factors that become significant when dealing with the systems we work in, so perhaps we could share some of them.

**Barbara:** That sounds like a useful idea. Perhaps the first is to be quite sure what the issues are. In researching information for this paper, I came across our official response to "Education to be More", and was gratified to find that the concerns we have worked on in the past 2 years (is it really only that?) are totally consistent with the reservations we expressed in that paper. It is important too not to cloud the main issues with a shoal of red herrings.

**Jan:** I've found that getting to know the people we are dealing with is a help. The danger might be that you then predict their reactions, but some understanding of background, experience and attitudes certainly helps. One of the problems in this new bureaucratic structure has been the shortage of Early Childhood people, and the total absence in the Ministry of a proper Early Childhood presence. As one official told us at a meeting, it all depends which drawer is pulled out, who you get. That situation can't be in the best interests of Early Childhood nor of efficiency in the Ministry.

**Barbara:** We need to remember that bureaucrats are people too, with their own pressures, personal agendas, ups and downs. Courtesy extended is usually returned. If it isn't, that is a problem for that person. I remember an instance of a Ministry official telling a meeting of Early Childhood people, many of whom were there in a voluntary position, how over-worked and stressed they all were in the Ministry. I waited a moment, then decided a response was called for and spoke of the inappropriateness of such a remark in that setting, but managed to stay calm, which earned me the appreciation of some others who thanked me for what I said, and acknowledged that they wouldn't have been so polite. It would seem to be an asset to be able to stay cool, at least outwardly.

**Jan:** Solidarity is a key word - in other words, being able to speak on behalf of a large number of people, after real dialogue. The effectiveness of the Playcentre networking has been a real plus - we have had data, views and feedback from all parts of the country when needing to present a case. Beyond playcentre the value of FECEO (Federation of Early Childhood Education Organisations) becomes obvious, in the strength of a united voice on Early Childhood issues. Of course there will be some matters that are specific to one kind of service, but it is possible for the services to support each other when there is a communication link.

**Barbara:** Yes, one of the gains for Early Childhood in all the change has been a better level of communication and understanding among Early Childhood interest groups, though it is disappointing still to find an occasional individual making unconstructive comments about another service. Politicians and officials can be quick to leap into any such crack and try to insert a wedge - a kind of divide and rule attitude.

**Jan:** Communication is vital - written and oral - but it was obvious when reviewing our own written communication with officialdom that it is critical to have everything documented, even to the point of writing to a minister stating what you believe him or her to have said in a meeting. Replies can be ridiculously slow in coming, and further correspondence may be needed, but no letter is wasted, as copies can be reproduced for later reference, or for referral to others.

**Barbara:** That was certainly valuable when we were desperate for a response from someone - anyone - to ongoing concerns in early 1990. I wondered seriously at the time whether the Minister actually saw his own mail, and it was clear that he hadn't seen a briefing paper that went from his office to the PM for a meeting with some of us. However, when the response came, it was politically astute of the Minister to deliver it to the Playcentre Conference in May 1990, together with a personal apology to me for the problems that had not been addressed. That was a good feeling.

**Jan:** We come to the point of asking whether and to what extent we want to bend and beat bureaucracy - it seems a bit like winners and losers. Bureaucrats would do well to realise and acknowledge that the people they serve - people like us - are most effective and cooperative when we feel listened to - really listened to, not just through some "Claytons" consultation.

**Barbara:** They need to be in touch with the reality of the here and now - I have a feeling that refresher work in the real world would be advantageous for many bureaucrats.

**Jan:** Most of us are too busy for game playing, so it would be good to think the decision makers had our best interests at heart. Years of voluntary service leads to intolerance of money and time wasting. A study of the true cost of implementation of the changes, and the ongoing, often premature reviews and alterations, might be an eye opener to many in a depressed economy.

**Barbara:** I have believed and stated often that there is no policy that is set in concrete. The events of the last 2 years endorse that view. There is no easy way of measuring the effectiveness or otherwise of the efforts we have put into achieving what we hold to be important, and the need for negotiation continues. What is important is to keep in mind what Early Childhood is all about, to be prepared to bend a little while trying to get movement from the bureaucrats, and to stand tall in the face of low status for Early Childhood Care and Education.

**Jan:** Timely words, Barbara, as the battle does still continue, with a new round of working groups and the Consultative Committee confronting us. Let us ensure that the children are not forgotten - young New Zealanders are surely worthy of our risking an occasional bruise in our efforts to bend bureaucracy.

**Sources:**

- Correspondence between NZ Playcentre Federation and the Office of the Minister of Education, the Ministry etc.
- Minutes of meetings
- Newsletters from Ministry Offices
- Records of NZ Playcentre Federation
- Personal memories

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# A "Purple People-Eater" or Quality Assurance Mechanism? The 1989/90 Early Childhood Centre Charter Requirements

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*The early childhood centre "charter", officially introduced with the publication of the "Early Childhood Management Handbook" in 1989, was thought to be "the key to improving quality" in services (Meade, 1990, p.7). However, the Handbook which was in fact a purple folder containing the charter guidelines, soon assumed an alias within the early childhood field of the "Purple People-Eater". This paper examines the positives and negatives of its introduction through study of the experiences of different early childhood centres and the perceptions of staff, management, and parents.*

*A "charter" is defined as a contract between the Ministry of Education and the individual centre, drawn up through consultation with parents and the community. Charter documents contain an outline of centre policies, philosophies, and characteristics. They are required to specify in what ways and how the individual centre intends to work towards providing standards of higher quality than the minimum licensing level The charter is a quality assurance mechanism for the government. The funding of individual centres from Vote:Education is linked to the development and approval of charters with the Ministry according to the level of quality the government is prepared to support.*

*It should be noted that individual centres had to comply with minimum licensing standards before they could negotiate their charter with the Ministry of Education. Details about both the minimum licensing requirements (required to operate) and the higher standard charter requirements (not required but necessary to obtain funding) had not been finalized and officially promulgated at the time that centres were expected to prepare their charter.*

## Introduction

### Background

In early 1988 a working party on early childhood care and education was established and chaired by Dr. Anne Meade. Their report, called *"Education to be More"*, argued that the government should be concerned about quality assurance and should provide incentives for high quality, accessible, and affordable early childhood services in all communities.

To achieve this, they recommended the State should provide funding to the providers of early education services rather than to the parents. This would give the State the ability to have greater control over centre quality; through setting up a process(s) to make centres accountable to them

It was proposed that another way for the government to influence quality was through the setting of national standards. The Meade Committee considered that licensing regulations for all services should be introduced and compliance made mandatory. They further recommended that centres have a charter, based on National Guidelines to be set by Government.

In February 1989, the Labour government's policies for early education were released in a booklet called *"Before Five"*. The policy statement broadly followed the Meade Committee's recommendations. The "Before Five: National Guidelines, Charters, and Licences Working Group" was formed to draft the minimum standards for licensing legislation and also to formulate the national guidelines for charters and approval procedures. The *"Early Childhood Management Handbook"* (hereafter called the Handbook) was developed from this and distributed to centres during October/November.

On 1 October 1989 the Department of Education was replaced by four education agencies: The Ministry of Education, The Education Review Office, The Early Childhood Development Unit, and the Special Education Service. The implementation unit for the reform of education administration instructed kindergartens, playcentres and childcare centres that if they wished to receive government funding through Vote: Education they had until 1 July 1990 to develop and negotiate a charter with the Ministry. The Ministry's time-line for charter approval was affected by not being able to first license centres, as the legislation for this was not passed until September 1990. The Statement of Desirable Objectives and Practices was gazetted on 6 December 1990, and the deadline for charter approval was put back to 1 March 1991, and then again to 30 June 1991.

## Possible implications for quality promotion and assurance in early childhood services

The guidelines for charter development contained in the Handbook make no distinction between services traditionally perceived to provide care and those categorised as educational. An artificial dichotomy between the care and education components of the early childhood programme is well argued in the New Zealand literature (May, 1985; Smith & Swain, 1988). Researchers have shown that kindergartens and playcentres and childcare centres all provide both care and education (Meade, 1985; Smith, 1988). Now, both types of services are required to detail their educational and care components in order to receive increased funding on a more equitable formula. An implication is that the status of the childcare service and ultimately of the field as a whole should be raised which in turn may have positive consequences for children, families, and staff through greater cohesion and co-ordination between services.

Linking government funding to charter development seems to be an incentive and enticement for centres to raise their standards as high as they individually can. Whereas minimum licensing standards help to ensure that all centres have the same minimum floor of quality, the main idea behind the introduction of charters seems to be to encourage centres to work towards providing the best they can in what areas they value and see room to improve on. This can only be positive, because as May (1991) comments, even a number of the basic licensing regulations need to be strengthened in some centres.

Financial accountability for government funding is one main reason for introducing the concept of the charter. Accountability is considered critical to ensure service quality (May, 1991; Meade, 1988). Centres are, in the main, small, autonomous, self-contained settings, where participants all know one another and one or a small group of people tend to take responsibility for financial management and decision-making with few if any mechanisms set up to be accountable to parents and staff. Most early education centres have had little experience of opening their doors, programmes, and administration records to officials.

Meade (1990) explains that because a charter is a contract between the community and the centre, as well as between the centre and the government, it "sets in train some of the processes that are valuable for child and family well-being" (p.7). For such good and desired things to occur early childhood services need to be 'nested' in a wider support system, including:

> "in-service training administrative support, licensing standards and personnel who support the programme [not undermine it] (Meade, 1991, p.4)".

Her views reflect Bronfenbrenner's (1979) thesis that different systems and the interrelationships between these systems have an impact on children's development (for example: the family, the early childhood centre, the community, and government organizations).

An intention underpining the concept of the charter seems to be to foster communication and collaboration between centre, home, and community settings. This could support devolution of power and decision-making from early childhood organizations and employers to individual staff members, parents, and the community in which each centre is contained.

Researchers have demonstrated that when there is good communication and understanding of expectations between parents and staff an optimal level of continuity between home and early childhood centre environments is more likely to be experienced by children (Powell, 1989; Smith & Swain, 1988). Educational philosophers point out that parents do have a right to participate in educational decision-making (Forster, 1989). Cook (1982) advocates that:

> "Parents must overcome feelings that the centre is providing a service for which they must feel grateful ... and not criticize. As the centre operates for your children you have a right and a duty to participate in decisions on how it should operate".

An important component of good-quality programmes is the nature of staff-management relations. The importance of flexibility in leadership style, shared decision-making and consensus among staff on programme aims and practices has been demonstrated (Smith, McMillan, Kennedy & Ratcliffe, 1989; Jorde-Bloom, 1986).

The community can gain from involvement in educational decision-making (Bibby, 1985). For example, ethnic minority groups who try to have some impact on the education of their children, whether they are parents or not, are likely to affect outcomes that are empowering for their culture.

Problems may however be encountered in trying to foster closer relationships between centre, home, and community for the purposes of consultation on charter content and shared involvement in charter development. Childcare centres are less likely than kindergartens and playcentres to serve their immediate areas (Royal Commission on Social Policy, 1987). Community consultation may therefore be of less importance and relevance for childcare centres. Lack of parent commitment and expertise for serving on centre committees are two issues noted in the New Zealand literature (Meade, 1981; Renwick, 1988). Smith (1986) reports that parents were found to form closer relationships with staff in childcare centres than in kindergartens. She suggests a number of reasons for this, including: better staff/child ratios and children tend to enter childcare younger and spend more hours in their centre. Staff ability to establish relationships with parents can be affected by the amount of time that they have to communicate with parents during the day, the nature of staff pre- and in-service training courses, and personal factors such as experience and maturity (Renwick, 1988; Smith, 1986).

A social agenda seems to underpin the charter guidelines. Some of the principles are more philosophical and socio-political in nature and do not seem to be characteristic of the beliefs and practices of most early childhood practitioners. How staff and management will react to the principle, for example, that "children with special needs and their families are entitled to have their individual and special needs catered for ..." and the requirement that "children with special needs will be taught in the same setting as other children", should be interesting given that centres tend not to have special needs children and those that do such as some kindergartens tend to have them as a special group within the programme.

Consciousness raising may occur through consideration of the principles in the charter guidelines. Efforts to consult and document what the individual centre is about in relation to the principles and requirements could be change-oriented (Kells, 1983). The processes and possibilities identified and discussed may excite management, staff, and parents and lead to philosophical and physical changes in centres. This however, would depend upon perceptions of the purpose of the charter exercise. If external forces, such as pressures from the Ministry or threats of loss of funding, are the primary motivation, then it seems more likely that the charter exercise will be a just a (bureaucratic) task to be preformed rather than change-oriented at the philosophical and practice levels.

According to Meade (1990) early childhood staff tend not to do enough self-reflection and seem to give insufficient recognition to the value of self-conscious practice. To develop a charter as outlined in the Handbook, staff are required to reflect on and document their goals, aims, and practices. Consultation with parents and community will provide feedback which should result in self-evaluation, further reflection, and the introduction of positive improvements. Research suggests a link between staff engaging in self-conscious practice and the quality of children's experiences (Meade, 1985; 1991).

## The Research Project *

A project on "Quality in Early Education and Care: A study of Charter Development Processes and Outcomes", funded by the Ministry of Education and based at the University of Otago, was carried out in the Otago region.

Preliminary discussions and meetings were held with government officials, representatives of early childhood organizations, and management of centres selected for study in late 1989. Background information was collected and full data collection commenced when centres opened for the new year in 1990.

Ten early childhood centres that differed in characteristics such as type of management, location, roll-size, and adult-child ratio, participated: four kindergartens, four childcare centres, and two playcentres.

A collaborative research approach was taken. The researcher observed (and at times even assisted) at centre charter meetings and had discussions and individual meetings with various participants. Three joint meetings of representatives (parent and staff/management) from the centres were held at the University. These meetings were held at strategic points during the charter development process: March (by which time most had started to look at charter preparation), June (when they had prepared their draft charter), and November (when they could now reflect on the process). The meetings were designed to provide opportunities for participants to share experiences, learn from each other and give feedback on the findings of this research project as the information was being gathered and written-up.

## Main Findings

### Conformity or Support of Differences Between Centres?

Confusion was evident as to whether individuality in charters was possible. This was because despite Ministry rhetoric about charters being a description of the practices and philosophies of the individual centre and the centre's management plans for achieving standards of higher quality over time, the principles in each section of the *Handbook* were stated by the Ministry to be mandatory and management plans had to cover these. A double message was contained in the Ministry's (1990) statement that:

> "As long as the principle of each charter statement is addressed in the individual management plan, it may be expressed differently by different centres".

There was general recognition across all types of centres in this study that:

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* A more detailed description of the project, including methodology, sample, and research procedures is available from the presenter or from the Ministry of Education. Please see the presenter's note at the end of this paper.

(i) What was written in the final draft charter was written to "please the Ministry". "A lot of it is just looking at what is written in the handbook and writing something similar" (director, Centre J), and of "**formulating the descriptions and documenting what we do**" (director Centre I),

(ii) "It seems like we have to pretend to consult when so much of the charter is laid down anyway" (director, Centre H). "What say the parents all want something in the curriculum that's not allowed: Do you just bow down to the Ministry and word the charter round the corner and round the bend" (president, Centre A),

(iii) "The Ministry gave a new meaning to 'negotiate'. We have to negotiate. They don't have to" (head teacher, Centre C). "If we want the new funding we must toe the party line" (president, Centre A),

(iv) "We're probably all going to have quite similar wording such as 'providing a warm and secure environment for the children to be in'" (head teacher, Centre D).

## Decision-Making Structures

Writing the charter document was mainly the responsibility of managers, including charter committees and/or staff. Power structures within centres seemed little altered as a consequence of the exercise, and final decisions were made by management, and by the associations responsible for the kindergartens and playcentres in this study. The kindergarten and playcentre associations provided their centres with specific guidelines (framework) on what charters should contain, and checked their charters before they were submitted to the Ministry. The proprietor of a private childcare centre who usually made most decisions wrote her centre's charter and then provided staff and parents with copies for their comments and approval. In contrast a proprietor of another private childcare centre who was also supervisor of the centre and seemed to have a more consultative approach to decision-making involved her staff in drafting charter statements.

## Consultation

At all centres, parents were requested more than once to attend charter meetings or to be involved in the process in some way. This contrasted with attempts to consult with individuals and groups in the community who were usually not approached a second time if lack of interest of unwillingness to participate was shown. Consultation with parents was regarded as much more of a priority than consultation with the community. At four centres though (three childcare centres and one kindergarten) carrying out community consultation was considered to be problematic. Their definition of community was a 'neighbourhood' yet their centres drew families from a wide area or from many different areas which made, they thought, community consultation logistically very difficult and an unreal task to ask of them.

At the June combined centre meeting for this research project the representatives were asked to discuss how fruitful they had found consultation with various groups and to provide a rating for their centre on a four-point scale of "most useful" to "not useful". Table 1 shows that centre representatives consistently reported that parents were the most useful group to consult with followed by Maori advisers/groups. Consultation with people in their neighbourhood (public), primary schools and businesses, was considered to have been least useful.

At the playcentres (Centres A & B) parent consultation was found to be "useful". It was "most useful" at three kindergartens and "useful" at the fourth. Parent consultation was "most useful" at the institutional-based childcare centre, "useful" at a private childcare centre, and "slightly useful" at the community childcare centre (Centres H, I, and J). The supervisor at the second private childcare centre reported that "what little input parents gave" had been "useful".

Of the centres whose staff or charter subcommittees sought the assistance of Maori advisers and people in their community their help was "most useful" at a kindergarten, "useful" at a playcentre, two kindergartens, and one childcare centre, and "slightly useful" at the fourth kindergarten. Contact with people in the neighbourhood (i.e. public) was either "slightly useful" or "not useful" at the centres where public involvement had been sought. Consultation with teachers and principals of primary schools was "most useful" at one kindergarten, "useful" at a second kindergarten and "slightly useful" at a third kindergarten, one childcare centre and one playcentre. Consultation with local businesses was "slightly useful" and "not useful", at a childcare centre and kindergarten, respectively.

**TABLE 1.**

**The reported usefulness of centre consultation with various groups about their charter's**

(4 = most useful, 3 = useful, 2 = slightly useful, 1 = not useful)

| CENTRE | PARENTS | PUBLIC | MAORI COMMUNITY | SCHOOLS | BUSINESSES |
|---|---|---|---|---|---|
| A | 3 | - | - | 2 | - |
| B | 3 | 2 | 3 | - | - |
| C | 3 | 2 | 2 | - | - |
| D | 4 | 2 | 3 | 4 | - |
| E | 4 | 1 | 3 | 2 | 1 |
| F | 4 | 2 | 4 | 3 | - |
| G | 2 | - | - | - | - |
| H | 3 | - | - | - | - |
| I | 4 | 2 | 3 | 2 | 2 |
| J | 2 | - | - | - | - |

Up to 16 different methods of consultation were employed. Kindergartens and playcentres used a greater variety of ways on average than the childcare centres. Carrying out consultation was not found to be easy. At one childcare centre, for example, the director and staff, feeling disillusioned with the lack of parent feedback, decided that "no comment" indicated parent consent. The low response rate to questionnaires surprised the kindergarten teachers. As one head teacher said, "they required continual jollying along from us"

Problems included: negative feedback, and parent apathy particularly in terms of attendance at formal meetings and responses to surveys. Here is a sample of comments from staff and managers relating to the difficulty of parent consultation:

> "It takes a lot of parents a long time to get used to a place before they get the confidence to join in" (Centre F)
>
> "We hear the comment of: my children won't be here when it's in place so why should I be involved?" (Centre C)

> "People are equating our meetings with those of the school boards of trustees. They just don't want to put themselves in such a position where they are involved to a large extent (Centre H).

> "Our Maori parents felt overwhelmed by being asked to help with the Treaty section. They said we come from the North Island and we don't know very much about our culture" (Centre A)

Some ingenious techniques and variations to the usual methods of consultation helped to encourage involvement in the consultative process. For example, some centres organized social occasions. It was not possible for in-depth charter discussion to take place at these gatherings, but they nevertheless gave sub-committee members/managers and staff an opportunity (although it was usually brief) to "raise the matter of the charter with as many parents as possible at one time". One kindergarten had "... a children's fun-day barbecue with the charter dribbling around the outside". Another kindergarten sub-committee organized a fish 'n child evening to "... throw the charter at them by surprise". A playcentre held a public meeting at the local hotel with supper provided because "... you've got to bribe people to make them come").

A childcare centre director believed that a high parent response rate to a survey was achieved due to the use of a personal, here and now approach of asking each parent as they entered the centre to complete the survey before leaving.

At kindergarten and playcentre meetings the possibility (or "threat") that government funding might be discontinued was frequently mentioned. At all centres the shortage of time or urgency for completing the charter was used as an argument to ensure and encourage commitment to and involvement in the process.

## Staff-Management-Parent Relations

Some parents and staff (especially new staff) learnt about and developed a greater understanding of their centre's philosophy and practices though the consultative process. For example one kindergarten teacher reported that:

> "A parent wrote in to say that she hadn't realised those procedures existed and so that's a really positive side of writing the charter" (Centre D).

Managers and staff learnt more about parent and community views. Questionnaires and surveys were useful for indicating how parents and community members viewed the centres, their programmes, and what they needed more information about. Some parent criticisms indicated a need to provide educational material or to plan parent education seminars. At one kindergarten, for example, a parent had written that sand clogged up her washing machine and the cost for repairs was $30.00. The parent questioned whether there was any need for a sand-pit at the kindergarten! - much to the teachers' amusement. At the playcentres, communication amongst parents was enhanced through the increased opportunity provided by the consultative process to air their criticisms and to clarify concerns. At the childcare centres, the requirement to consult was believed to have led to some improvements in three-way communication between managers, staff and parents.

At all the centres, positive feedback, when this was given, was affirming for staff who usually received little supportive feedback from parents. A theme that often arose in discussions about the consultative process was that improved communication was important to foster because this would help to eradicate what staff and management perceived as parent misunderstandings and concerns that need not be.

The kindergarten teachers found that consultation tended to be of greater benefit to the parents themselves rather than affecting much of what was written in the charter. A few teachers expressed surprise that parents had concerns about their programmes. As a result of feedback some changes were made that teachers might not have considered according to their professional views, or perhaps would not thought of doing had parents not made the suggestions. For example, at one kindergarten most parents were found to believe that the teachers did not need to home-visit children and families. The teachers thought about this and reported back that they will now do home visits at the parents request or if they want to follow-up on a problem with a particular child.

## Social/Philosophical Challenges

A childcare proprietor pointed out the meaningless in practice of some statements which charters were expected to contain. For example about the statement that staff should ensure that meal and snack times are an enjoyable occasion, she asked:

> "If some kids wake up at snack time very grumpy is it our fault? or if they don't like what's being served?"

The most contentious charter principles and requirements were those relating to the Handbook sections on the Treaty of Waitangi and Special Needs. People generally agreed in principle with the intentions underlying these requirements. This was probably because people realised that:

> "... in most areas we had little choice in the actual adoption of concepts such as equity or Treaty of Waitangi. If we want the new funding we must toe the party line" (Centre A).

It was the practical implementation of the requirements that was of concern and debate. For example, parent-staff discussion at many centres was recorded on the need for resources and support services to be available before special needs children could be accepted. For many parents the introduction of taha Maori and bicultural practices in the programme was not deemed to be important or relevant because most or all children enroled were Pakeha or European, or from other ethnic groups.

The principle of 'Equity' was also debated, but only because it seemed that many staff and parents were not sure of its meaning and confused it with biculturalism. The exercise of charter writing was of educational value to the participants who sought clarifications of concepts used in the Handbook. For example, the distinction between "programme" and "curriculum" was discussed at one childcare centre charter meeting.

## External Support

Most centre representatives were annoyed with the concentrated and 'undue' pressure placed on them to prepare a charter for negotiation by 1st July, especially since the legislation for this had yet to be passed. Feelings of being let down, anger, and powerlessness were reported when the date (at the eleventh hour) for charter negotiation was extended. They were annoyed that some areas they had worked on, such as the Treaty of Waitangi section, were no longer necessary for chartering or were rumoured to be changing due to a change in government. They had worked hard, received no feedback, and nothing happened in the way that they had believed it would. As one head kindergarten teacher complained:

> "I feel it's all been rather an anti-climax. We rushed with our charter and then what happens? The Ministry hasn't even looked at it. They put the pressure on us and it's turned out to be needless" (Centre F)

Another head kindergarten teacher said:

> "Looking back on it, it was a relatively simple exercise. If it were taken slower and more organized..." (Centre E)

Some centre representatives suggested that the Ministry and the Early Childhood Development Unit could have provided more "pats on the back" and guidance to reduce stress and uncertainty about whether what they were doing, was right.

Centres received some conflicting, and at times difficult to understand instructions. This was a "sore point" amongst people at all ten centres. Requirements for chartering were open to interpretation. Advice from different agencies and government organizations was being given along the lines of "We think you will have to...", or "Although we said ... you now have to ...". As one kindergarten parent reported it was generally felt that this was "a terrible waste of our energy".

## Some Costs of Charter Preparation

Most participants did not appear to enjoy their involvement or the challenge of it. Comments such as "I'm sick of the whole topic of the charter" were often heard at meetings especially towards the end of the process. Participants spent copious hours carrying out consultation and drafting their centre's charter over a relatively short period of time (three to six months depending upon when preparation started). They encountered considerable work: reading and communicating with each other what the requirements for writing a charter were; attending Association level meetings and ECDU in-service courses; carrying out consultation; attending and preparing for centre meetings; and assisting with or drafting their charter.

A playcentre parent wrote a letter to the Minister of Education expressing concern about the time-frame for chartering and the effects it was having on her and other families. She said that her "house was a mess" because of the time that was required to be invested in helping to prepare her playcentre's charter. She explained that parents already gave large amounts of their time, through attending monthly Parent Council meetings and parent helping.

At the playcentres, parent education and children's activities were affected by the time that parents and supervisors invested in charter preparation. Significant disruptions to kindergarten and childcare centre programmes did not seem to occur. This seemed to have been because not all teachers, staff, and parents were involved or played a major part in consulting and organizing meetings. However at the playcentres, all parents belong to their Parents Council and played a more or less direct part in charter development in addition to their usual centre commitments.

Charter preparation resulted in some upheaval in centre administration. A massive amount of additional paperwork was created for managers and staff. The normal management meetings were affected, as was the ability of most managers/directors to focus on their usual tasks.

It proved to be a financially costly exercise. A bone of contention, raised with a Ministry Liaison Officer by some people at the March research meeting, was that unlike school trustees they did not receive payment or reimbursement of travel expenses from the government. Consultation and charter production was an expensive undertaking in terms of: the unpaid time it took, the time that could have been used for other centre related and personal tasks, and the financial costs incurred such as for photocopying.

## Accountability

There is now greater consciousness amongst parents, staff and managers of regulations and the government's ability to have an impact on administration and programme practices. There is general recognition across the centres though that what is stated in charters and what is actually done in practice can be two different things because of the difficulty faced by officials in checking for this.

Management and staff recognise that parents can hold them accountable to what is stated in their charter. However, charter development does not appear to have resulted in greater actual accountability to parents, apart from helping to open up the channels of communication and enhance centre-parent relations. Some staff suggested that the charter document can be useful to fall back on in discussions with parents who want them to do something that they believe should not be done. At some charter meetings it was observed that parents do not always seem to want or think that greater accountability of management to them is possible. Moreover, some parents indicated that they do not believe that they are qualified to make critical appraisals:

> "Well, you teachers know best",
>
> "Surely its not up to us say",
>
> "We'll leave it to you to write up what you do".

## SUMMARY AND DISCUSSION

Was the charter the key to improving quality that it was hoped it would be? It did set in train some processes that are critical for promoting quality such as Meade (1990) suggests. But a number of problems related to the policy and the lack of public relations work on it before its introduction were experienced. This meant that it did not have as many or as significant benefits (over the year of study) as hypothesized from the literature reviewed.

Centre practices and programme philosophies were documented and this encouraged managers and staff to engage in self-reflection. Most staff and managers seemed to work hard to try to obtain parent feedback during and after drafting the charter. This lead to greater communication by parents with staff and managers from their perspectives as consumers and children's primary educators/carers. It helped to alert staff, managers and parents to each others views and understandings about the early childhood programme.

Only in the playcentres did most parents sit down with staff and decide what was important for children's learning and development (it happened to a lesser extent at a kindergarten and childcare centre). Yet, this often happens anyway for other purposes in playcentre because of the nature of the organisation.

Much of what people in the ten centres wrote for their charter was based little on consultation and shared decision-making within centres. Charter content was in the end shaped essentially by: the guidelines in the Handbook, the framework of appropriate charter statements provided by the local kindergarten and playcentre associations, the policies of committees and individual managers/proprietors, and the staff's professional knowledge and usual practices.

It was difficult to assess if centres had raised their standards, as May (1991) suggests is needed, because at the same time all centres were working towards meeting various new proposed minimum licensing standards. Increased awareness of accountability was evidenced through concerns (of even the private childcare proprietors) to ensure that parents commented on and approved their charter. Awareness that government was concerned and interested in the quality of services through its officials was also evidenced.

The main problems experienced in charter development were:

(i) learning what the concept of consultation meant, defining who constituted the community and who was important to consult with,

(ii) parents perception of their ability or need to be involved,

(iii) the urgency of needing to learn and understand the terminology and details in the Handbook, which lead to wasted time in discussions/arguments to clarify,

(iv) considerable work overload in centres to the expense of some things that usually happen in centres, such as parent education programmes and the time that parents and staff/management had to do other out-side-of centre things,

(v) emotional strain and financial costs which discourages future willingness to be involved in such a process,

(vi) development of mistrust for government agencies and officials because of conflicting views, changing rules, deadlines, and requirements,

(vii) confusion over requirements due to differences in interpretations received and details not officially finalised,

(viii) perception of charter development in nine out of the ten centres as more of a bureaucratic exercise rather than one to help to improve programme and service quality.

For full benefit to be obtained, centres needed more time, less pressure, more advisory and resource support, and greater freedom to examine and articulate in their charters how they define quality and aim to provide it. Some of the introspection and firming up of philosophies occurring at the local association and national levels - but as a consequence of feeling threatened to move towards uniformity and conformity - was positive. This should have been happening more in the individual centres. The research literature demonstrates the importance of self-reflection, articulation of aims and programme processes, and self-evaluation, for ensuring that children do experience the kinds of benefits which services intend to provide.

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## Presenter's Note:

The study was carried out with the assistance of Associate Professor Anne Smith and Dr Terry Crooks.

A copy of the full research report "Experiences of charter development in early childhood centres in 1990" is obtainable from the Research and Statistics Division, Ministry of Education, Private Box 1666, Wellington.

The project was featured on a video Education Update, No.6. produced by Learning Media, Ministry of Education, Wellington.

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# THE IMPACT OF POLICY ON PROGRAMMING IN LONG DAY CARE-AN AUSTRALIAN PERSPECTIVE

The first years of a child's life are the most important. This message comes from many sources - families, researchers, services for young children and sometimes government bodies. This understanding was recently summarised by Duffie (1991,10).

"The importance of the early years of the child is now internationally acknowledged as the time of most rapid learning and development. It is the responsibility of all educators to honour the importance of the early years by providing for the care and education of all children entering early childhood services."

However, it would appear that there are many factors apart from the benefits for children, which influence planning and programming within long day care centres. It would appear that the cuurent policy aim of Australian government bodies to meet the needs of the community by providing more child care places is not taking into account factors that may affect programming issues.

As suggested by Clyde (1991) the changes within society and community attitudes over the past 20 years have been accompanied by economic and political policies, including equal opportunity and social justice policies, which have led to a massive increase of women with dependant children entering or remaining in the workforce. This has led to Government iniatives within Australia which have attempted to meet the needs of families with young children. While these initiatives in creating more child care places can only be applauded, it has become apparent that all levels of government need to be involved in a review of certain aspects of the policies and implementation of the Children's Services Program which have an impact on planning and program quality.

Many issues surrounding the government program became apparent to this author during a recent study of grouping in long day care centres in Sydney (Farmer, 1990). This paper will not focus on full discussion of the results of this study, but will attempt to raise the general issues that were identified as a result of this research with respect to government policy.

## RESPONSIBILITIES AND RESPONSES: GOVERNMENT PROVISION OF EARLY CHILDHOOD SERVICES IN AUSTRALIA.

As in many other industrialised nations (Suransky, 1982) benevolent bodies dominated the provision of institutional child care in Australia through much of this century. The focus of much of this provision of settings for young children was aimed at *rescueing* the children of working class parents by providing appropriate environments for these children in kindergartens. These attempts were often made by well meaning charitable organisations and women's groups. Despite occasional attempts by government to become involved, such as with the funding of the Lady Gowrie Centres in each state (1938) , and input by the Department of Labour and National Service during the second world war (1939-1945), it was not until the 1970's that Australian Federal Government became involved in the provision of child care services. Many of the reasons for this delay in government support for children's services have been documented elsewhere (Mellor, 1990; Brenna n and O'Donnell, 1986), generally however, the relectance of governments to become involved in child care services tended to reflect the traditional community view that the care of young children is a family, not a community responsibility.

Despite State Government support for pre-school services at this stage, these facilities were also unequally distributed. Provision of pre-school services varied widely in catering for the needs of eligible children. For example, in 1970 (Brennan and O'Donnell, 1986), the ACT catered for 50% of eligible children, other states ranged between 27% (Victoria) and 3% (New South Wales).

While the 1970's saw increased Federal Government support for child care services through the Child Care Act of 1972 which allowed it to make capital and recurrent grants to non-profit organisations and committed government to funding local groups (Hurford,1987; Brennan and O'Donnell, 1986), this period was also a turbulent one for children's services. Many recommendations of the Whitlam Labor Government were never realised due to the dissolution of the government in 1975, and the following Liberal/National coalition (1975-1983), while continuing to fund child care, reduced spending dramatically in 1982 as a result of the Spender Report.

The current national framework for child care policy came to the forefront with the Hawke Labor government's election in 1983. The perceived difficulties of the previous 'submission-based' model where the establishment of new services was considered on the basis of submissions, which led to inequity of service provision as it favoured articulate and well organised communities over those in greater social and economic need, led to the establishment of a new government program. In short, this program known as the Children's Services Program (or alternatively, the Capital Works Program) , aimed to increase the availability of quality child care for target groups within the community and to ensure that child care was affordable for those that could get access (Hurford, 1987). In order to do this, the government introduced an income related fee relief system; implemented needs based planning concepts to better determine the location of children's services; specified priority of access guidelines with priority going to working parents; and developed a more cooperative arrangement with State and Local governments with relation to the provision of services.

## IMPACT OF GOVERNMENT POLICIES ON PROGRAMMING ISSUES

Within this model, there is no doubt that there has been rapid expansion of child care places for children under five years of age (see Tables 1 and 2 ) predominantly through government funded long day care services, including family day care. This expansion is continuing, with an additional 116,400 places promised by 1995-96 (Hawke, 1990), with the provision of places in long day care, family day care, occasional care and before and after school care.

After almost a decade of rapid expansion of service provision throughout Australia, both policy makers and professionals need to address many issues related to the impact of the Children's Services Program on the quality and provision of services to children and families. As, Clyde (1991, 23) so clearly states,

" Where does that leave those people who are interested in child care as a childrens service and who wish to particpate in the development, implementation and evaluation of such services?"

It would appear that the policy aim of government bodies to meet the needs of the community by providing more child care places is not taking into account factors that may affect programming issues.

What are some of these issues?

### *Type and Design of Settings*

One issue appears to be the suitability of current building designs used within the Australian Capital Works Program.

One of the advantages of the present Capital Works Program has been the potential for shorter building times for new centres due to the State and Local government cooperation in the provision of building sites and the use of a standard building design (Hurford,1987). However, one of the outcomes of using the standard designs has been that services have felt locked into a particular style of program and number of children. Although there are several designs from which to select, all designs cater for forty children from birth to five years and contain two distinguishable playrooms - one for under threes and one for three to five year olds. While many early childhood educators, in relation to their educational philosophy or the directions in current research, might prefer smaller groups of children, or other criteria for grouping children apart from age, the building designs make these possibilities more difficult and less likely. While new services are now able to request alterations to designs, these are at the cost of the management/sponsoring group. This causes particular difficulties for community management groups with limited, if any, funds.

No provision is made to allow for even the possibility of caring for children in smaller groups than the standard fifteen and twenty five children, nor in grouping the children in a different way. However, evidence shows that small centres and groups are more supportive in the development of social competence, interactions with others, and active involvement in learning experiences (Clarke-Stewart and Gruber,1984; Cummings and Beagles-Ross,1983; Smith and Connelly,1981; Ruopp, Travers, Glantz, and Coelen,1979).

As well, the design does not take into account the need in some geographical areas for larger or smaller centres, or the demand for care for children under three years. Currently the design of the building caters for fifteen children under three. Based on reports from the field however, the majority of children on waiting lists for places are in this age group, while in some geographical areas, services can not fill vacancies for over three year olds.

One centre in this author's study (Farmer, 1990) undertook minor alterations with the building design to obtain a licence from the State Government to cater for more children under three in order to meet the demand, however grouping difficulties still occurred due to other design features. It was evident that problems occurred due to the placement of facilities for under threes at one end of the building. This made it extremely difficult to place infants and toddlers in any section of the building except for the '0-3' room.

While it is important to have a building program that allows for centres to be built quickly to meet the growing need, consideration needs to be given to providing designs which allow a variety of programming possibilities. The lack of flexibility within the Children's Services program in terms of meeting the needs of diverse and special communities needs to be further addressed. A design which featured facilities such as the nappy change area, laundry and cot rooms in a position central to all playrooms would allow for more programming flexibility. In addition, a selection of flexible building designs from which to choose would then allow the needs of specific geographical areas to be met more effectively.

It is apparent that all levels of government need to be involved in a review of the building designs currently used and take a much broader range of factors into account in any new designs. Early childhood professionals, particularly those who have worked in the existing building design should also be involved in this review to provide a perspective on the possible inadequacies and alternatives that could be included in the designs. While the New South Wales State government has surveyed workers in existing settings, this information has not been collated and utilised as yet to develop the design.

### *Staffing in Early Childhood Settings*

While the Capital Works Program, has contributed much to the expansion of children's services in order to meet the needs of families with young children, other factors have impeded progress. Amongst these constraints, the lack of suitably qualified early childhood teachers has not assisted the situation. This has occurred, particularly in NSW, where expansion has been greatest and licensing regulations require qualified Early Childhood teachers in long day care. Many services Australia wide not only find it difficult to fill teacher positions, but any positions for qualified staff, such as workers with Child Care Certificate qualifications from Technical and Further Education institutions (TAFE) ( Ryan, 1989).

The lack of early childhood trained staff may be the result of three possible factors. Firstly, the attitude reflected in the Prospectus for one of the colleges in the early 1900's saw early childhood training as a preparation for marriage and child rearing.

"In choosing a means of livelihood for our girls, the fact must never be lost sight of that a woman's deepest instincts centre in the home... her natural place" (Spearritt 1979:13).

This belief is still prevalent in Australia today, although it is somewhat modified. Stonehouse (1988) suggests that the field of early childhood suffers from its associated image with mothering and that this has reinforced the low status of the early childhood profession. The assumption implicit in this suggestion is that mothering is seen as not such a desirable profession. Many people in the community, including politicians and public servants, see that early childhood education as a profession requires little education or remuneration, as most women "raise" children without training or payment. Duffie (1991:10) in her statement to the N.S.W. Industrial Commission for improved conditions and salaries for early childhood teachers, points out, however, that while learning in the home setting does occur, "within the group settings for young children, active steps have to be taken, to ensure that each individual child has the appropriate experiences necessary for their further development."

Secondly, widespread community perceptions that children's services are unnecessary for children when they can be cared for predominantly in the home where traditional views would suggest that they are 'better off at home', may have played a role in inhibiting the development of child care services and the early childhood profession.

Finally, this staffing problem is perceived to be a result of fewer people being educated in this area, (even though there have been two new Bachelor of Early Childhood Education courses begun in 1988 at the University of Western Sydney in New South Wales alone,) and a reflection of the poor image and conditions of early childhood workers. Whilst improved salary conditions are being achieved at the present time, moves towards bettering the situation with respect to attracting and retaining staff is an important issue relating to the status and image of early childhood workers.

In addition, this raises the issue that while there has been a massive expansion in the number of services there has not been a corresponding expansion in the number of early childhood qualified staff being trained. In this case the policies of different Government levels (Commonwealth- Federal Children's Services Program and tertiary training, and State licensing controls and technical training) have not been been developed at an equivalent rate, thus causing a mismatch in policies. This has led to difficulties in filling positions in settings, and this, along with corresponding high staff turnover means that the quality of planning and programs also suffers. Another factor affecting staffing issues relates to the fact that each state has its own licensing controls which sets standards for the number and type of staff required for early childhood settings. This, in itself, causes not only problems for the quality of services in different States (discussed later), but also for staff wishing to work in settings throughout Australia, not only in their home state where they may have trained.

### *The Quality versus Quantity Debate*

This expansion of services, as well as changes in funding provisions, while attempting to meet the growing need for child care, has contributed greatly to the 'quantity versus quality' debate in children services. The current approach of the Federal Government is to create new child care places and services whilst seemingly withdrawing funds from existing services. As a result of Amendments to the Child Care Act in 1986, users of child care were faced with huge increases in fees. Previously, Federal Government funded 75% of licensed staff salaries, irrespective of the cost of qualified staff. The funding basis changed to an amount per child, which meant a decrease in overall funding, without an assurance of funding meeting costs of trained staff.

When this situation is considered in conjunction with different State Government policies and licensing regulations, which may allow for less qualified staff, many concerns arise within the profession. The possibility exists that centres will not employ qualified staff due to lack of funding and increasing costs, with the lack of available trained staff increasing the risk of this occurring. As well, there has been a move towards the expansion and funding of family day care. This type of care, provided by community members in their own homes, is often seen as a cheaper alternative to long day care due to the very low wages compared to trained staff, and low operational costs involved. While Family Day Care should not be stigmatised as an inferior service, expansion of this form of care suggests a Federal Government not willing to expand child care places in centres as centre-based costs are greater.

Clyde (1991) has highlighted the current dilemma of balancing three often competing and contrasting variables; those of availability of services, affordability of services and quality of services. Suransky ( 1982) found in a study in the United States, that once high quality care is sacrificed due to economic factors, with child care becoming " an industry" and privatised, little attention is then paid to the developmental needs of the child. She observed in several different child care centres, that where the major concern was planning an economically viable service, the children's development was not fostered but rather, the main concern was how many children could be contained in a building with the smallest number of staff and for the least amount of money. Although the Australian situation has not reached the same extent of commercialism mentioned in Suransky's research, it is likely that negative influences may result from the emphasis in the present governmental policies and programs.

This is particularly seen in the Commonwealth Government's decision this year to provide fee relief subsidies to users of commercial child care services, but subsequent inaction on their part to monitor this effectively and efficiently (Clyde, 1991). High quality children's services are seen as an optional luxury by many, including some politicians, whether from Federal, State or Local governments. Some politicians who are under pressure to supply and extend services, may have short changed efforts to improve the quality of services. The great shortage of child places is such that parents choice of care is often quickly determined by the availability and cost rather than the quality of the program.

### *The Current State of Play*

In response to this mounting evidence that high quality programs are more rewarding for young children and that poor programs adversely affect children's social, emotional and language development, there have been moves by the profession to establish some way of ensuring high quality in programs. These moves have become stronger in light of the lack of government assurances and controls over quality.

As a result of the need to identify and assist services to provide quality programs, a global assessment tool has been developed for the Accreditation system of the National Academy of Early Childhood programs in the United States ( Bredekamp, 1984) aims to assist staff associated with children's services in implementing quality programs.This tool is based on a set of criteria which evaluates the overall quality of a program. The criteria represents the current consensus of the Early Childhood field in the United States regarding definition of a high quality program for young children. It is based on the following indicators:

* interactions amongst staff and children

* curriculum

* staff/parent interaction

* staff qualifications and development

* administration

* staffing

* physical environment

* health and safety

* nutrition and food service

* evaluation

The use of the tool involves a self study phase, carried out by the staff and management in their centre, a validation observation carried out by independent early childhood educators and consideration of accreditation of the particular centre as one offering a quality program by a Board of Commissioners.

This project has operated in the United States for the past three years and is currently being trialed in children's services in NSW. Other states such as Queensland and Victoria are trialing other accreditation procedures. The situation where services are trialing such evaluation procedures, in order to ensure high quality programs, is a positive step. In the recent Federal Budget, it was announced that one million dollars will be allocated by the government towards investigating a National Accreditation system for child care services. However, unless continued Government financial support for quality programs is forthcoming, and the number of service choices available to parents increase, many children will not be able to attend a high quality program.

The Hawke Labor Government's approach to children's services has been the provision of family day care, long day care and out of school hours care. Whilst long day care has been identified as the strongest area of need, this provision is still inadequate. There has been no expansion of preschool in the past decade, with increasing funds available from 1990 for the establishment of occasional care and out of school hours care. Due to the priority of access guide-lines, set by the Federal Government, only children of working parents or those seeking work or retraining, are able to attend a long day care centre.

Due the way services are targeted, the perceived division between care and education is extended, as many parents who are not working are unable to get access to centre based programs for their children. This has sometimes lead to animosity in the community as some families in the community believe they are disadvantaged as they choose not to do paid work.

This feeling is often exacerbated by the perception that families 'on welfare' get all the assistance as Long Day Care Centres are incorporated into Department of Health, Housing and Community Services and parents income levels are scrutinised by the Department of Social Security in order to obtain fee relief.

These perceptions that services are different, not only has an impact on policy concerns and funding issues but also relates directly to the quality debate. Several States do not require early childhood educated teachers within long day centres , but only within pre-schools. This could be one of the contributing factors to parents transferring their children from long day centres to pre-schools when their child turns three or four years of age, which may in turn limit the availability of places for non-working parents in the pre-school further.

Children's Services in Australia are currently (1991) the subject of a National Review by State and Federal Governments. The purpose of this review , known as the Functional Review of Child Care, may have major implications for future funding arrangements for all types of children's services. The key purpose of the review is to determine whether funding and administration should be undertaken differently by governments in order to reduce duplication, and to improve services to users of services. (Broadside, August, 1991). While this may be seen as a positive step towards rationalising policies, it is unclear as to the government's real agenda . Those in the profession are anxious that this will only lead to possible funding cuts.

Current policies reflect a government attempting to meet the need for child care places, perhaps at the cost of high quality care for those children with an existing place. With the dramatic increase in the number of services in the past seven years, debate has continued within the early childhood profession in relation to the type of program most worthwhile for children in the early childhood years. As many children are now in an 'institutional setting' from six weeks of age, it is imperative that they have suitable programs. It is apparent that all levels of government need to be involved in a review of certain aspects of the Children's Services Program which have an impact on planning and program quality. Early childhood professionals should also be involved in this review in order to provide a perspective on possible inadequacies and benefits of the current program, while also focusing on the issues of high quality care.

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## Approved Places in Government Funded Services for Children Under 5 (8)

| Year | Centres | FDC | Total |
|---|---|---|---|
| 1982 | 18,568 | 15,100 | 33,668 |
| 1983 | 20,008 | 20,100 | 40,108 |
| 1984 | 23,048 | 24,250 | 47,293 |
| 1985 | 31,398 | 32,197 | 63,595 |
| 1986 | 34,602 | 34,036 | 68,638 |
| 1987 | 40,812 | 38,361 | 79,173 |
| 1988 | 44,229 | 39,510 | 83,739 |
| 1989 | 44,148 | 39,550 | 83,698 |
| 1990 | 44,398 | 40,974 | 85,372 |

Table 1

## Approved/Licensed Places in Child Care for Children Under 5 in 1988

| Funded (8) | Commercial (9) | Total |
|---|---|---|
| 83,739 | 32,976 | 116,715 |

Table 2

# TOI TU TE WHENUA, WHATUNGARONGARO HE TANGATA

## PEOPLE COME AND GO BUT THE LAND REMAINS

Carol Garden
Senior Policy Analyst, Ministry of Education

Over the past three years New Zealand has embarked on the most thoroughgoing reform of education administration, and changes to its educational structures, than we have ever experienced before.

We have be reviewed, restructured, reshaped and relocated. We have been down-sized, decentralised, devolved and dis-established.

We have seen the demise of the Department of Education and the birth of the Ministry of Education, the ECDU, the SES, the ERO, the NZQA and other agencies, designed to pick up the functions of the former.Department of Education. We have also had a change of Government and, with it, major reviews of education. More recently, we have had a budget.

While all about us changes, and we, as parents and educators come and go, it is good to rememer that some things do remain the same. The land remains constant, as does the need of our children for the love, care and education of the older generations.

I would like to explore for a few minutes the impact of changes in early childhood education over recent years that have touched all our lives.

In 1988 the report of the working group on early childhood care and education, 'Education to be More', ( also known as the Meade Report) was released. This report provided the foundation and the framework for remodelling of the the delivery of early childhood care and education. This report was largely adopted by the last Government. I thought it would be interesting to compare current directions in early childhood education with the intentions of 'Education to be More'.

"Education to be More" identified the existing early childhood care and education structure as being out of date for New Zealand's economic, social and educational needs. Piecemeal development over many years had resulted in a diverse range of early childhood services, but had also resulted in inequality between the different services in such areas as access to government funding, childcare services, (and therefore to employment for women), and support for parents. Different standards of care and education for children had ensured.

It was time for changes to be made.

The Meade committee identified three essential features that needed to be present in every early childhood care and education arrangement. These were features which are in the interests of the child and the caregivers and the cultural survival and transmission to succeeding generations.

The committee addressed the benefits to be gained from good quality early childhood care and education and identified the characteristics of good quality services. These were staff:child ratios, group size, aregiver training, developmentlly appropriate curriculum planning and implementation, Te reo Maori and tikanga Maori, consistent care and education, partnership with parents or whanau, safe and healthy environment and close relationship with the community.

The committee identified issues relating to the status of early childhood care and education, equity of access to services, the importance of Maori determination and Maori control over services for their own children, the status of women and the structure and level of funding as five key areas as needing immediate improvement.

## 1988 GOVERNMENT GOALS FOR REFORM OF EDUCATION ADMINISTRATION

In addressing the task of reforming the administrative structures of early childhood services, "Education to be More" focussed on underlying goals that the Government of the time had made a commitment to.

**Equity**
- the principle of access to education for all
- equal employment opportunities for those working in education
- a recognition that the Treaty of Waitangi has special relevance for education.

**Quality**
- the Government's responsibility for maintaining standards in education.

**Efficiency**
- a recognition that resources in education are limited and that the best use be made of those available.

**Effectiveness**
- a need to ensure that the resources deployed in education achieve the desired results.

**Economy**
- that the community receive value for money from the considerable investment of resources in education.

These goals provided the basis for the four main policy mechanisms in the reform of education administration which applied to all sectors of education. They were:

**Charters**
- All education institutions receiving government funds must have charters approved by the Minister. In developing their charters there was a clear requirement that there be consultation with parents and communities.

**Devolution**
- Employer responsibilities and management would be devolved to local level.

**Bulk Funding**
- All government funded education instutions would be "bulk" funded, based on formula allocation systems, to provide for their salary and operating costs. The control of input expenditure was to be minimal.

**Accountability by review**
- The performance of all chartered education institutions would be reviewed against their agreed charters. For early childhood education, this also included licences and codes of practice.

The general themes and principles of Government reform, in particular the devolution of administrative responsibility and management to committees of management and boards of trustees, required the establishment of a range of new agencies and new accountability, review and management mechanisms.

Of central importance for early childhood services was the replacing of the old Department of Education with a new Ministry of Education, an Early Childhood Development Unit; a Special Education Service; an Education Review Office; a NZ Qualifications Authority, and in addition, a Parent Advocacy Council and a Teacher Registration Board.

## MINISTRY OF EDUCATION POLICIES

In looking at the impact of the new administrative structures on early childhood services over the last three years, I would like to focus on the early childhood education policies that have been put in place by Government to achieve the Government's 1988 goals of equity, quality, efficiency, effectiveness and economy.

### 1988 Ministry of Education Goals, Targets and Strategies

The Ministry of Education presented to the Minister of Education its first draft Education Goals,Targets and Strategies on 1 May 1990. There were ten goals, including one specifically for early childhood education.

### Goal 2. Provide appropriate and high quality early childhood care and education for all who wish to have access to it.

**Targets**

1. To increase access to early childhood care and education for Pacific Island people and for other groups whose current rates of participation are low.

2. By 1 July 1990 to have promulgated into regulations the "Minimum Standards for Early Childhood Centres" and "Minimum Standards for Home-Based Early Childhood Schemes".

3. By 1 July 1990 to have in place a qualifications structure that will define what constitutes a recognised qualification for a trained early childhood education teacher, and for this to be used by the District Operatons Division of the Ministry when assessing the qualifications of supervisory staff for licensing and charter approval purposes.

4. By the end of 1991 to have developed and published curriculum guidelines for early childhood centres.

5. By 1994 to have enabled childcare staff to upgrade their qualifications to the equivalent of a three year pre-service course.

**Strategies**

1. To identify reasons for low participation rates amongst Pacific Island children in early childhood education.

2. To develop a comprehensive policy for the training of early childhood education teachers.

3. To make opportunities available for those who live in rural areas to undertake early childhood education training.

4. To encourage Maori language immersion programmes at teachers' colleges and in the community for early childhood education teachers.

5. To commission research on what constitutes a quality learning environment in early childhood education centres, and to investigate appropriate methods of care and education for children under 2 years of age.

## 1988 GOALS - AS ACHIEVED IN 1991

Using the government goals of 1988 we can examine to what extent these goals have been achieved, following a change in government, major reviews in early childhood education and the 1991 budget.

### Equity

Access for all
- no limit on the number of new services
- exemption for funded playgroups
- policy for ECE centres above ground level
- building modifications introduced for users with disabilities

Equal employment opportunities
- charter statements for staff development
- field-based equivalency training courses
- college of education field-based training programme
- Employment Contract Bill

Recognition of Treaty of Waitangi
- included in Equity statement for charters

### Quality

Maintaining Standards
- three year ECE training established in all colleges of educ.
- equivalency training courses, and additional Advanced Studies for Teachers papers
- ECE Regulations 1990
- ECE teaching qualification recognition
- individual, collective, attestation
- first aid qualifications recognised
- staff:child ratio for under 2s changed
- buildings and premises
- fire safety authorities recognised
- curriculum guidelines for developmentally appropriate programmes
- charter guidelines - Desirable Objectives and Practices
- Code of Practice for chartered home-based care arrangers
- two major research projects in progress
- Parents as First Teachers programme planned
- recognition of hospital playgroups as ECE centres

### Efficiency
- Best use made of limited resources (Nov. '90 Memo)

### Effectiveness
- Resources used to achieve desired results (Nov.'90)

### Economy
- Community receives value for money
- bulk funding
- record keeping systems (Nov.'90 Memo)

Whereas "Education to be More" in 1988 had identified inequalities in the early childhood education structures, the 1991 government reviews of early childhood education identified regulations that were overly restrictive in allowing quality services to be easily accessible and affordable, and showed funding of services to be uneven.

The present Government is committed to the provision of high quality, self-managing, affordable early childhood education. It purchases from the Ministry of Education a series of outputs designed to help achieve these goals for early childhood education.

**The Ministry of Education's outputs, as they affect early childhood education, as at 3 June 1991 are:**

1. **Policy Advice**
   - research and policy development and policy review.

2. **Management of Contracts and Administration of Payments**
   - charters and licensing
   - EFTS (Equivalent Full Time Students) negotiations
   - tertiary funding
   - management of contracts with central agencies
   - payments to early childhood institutions
   - administration of discretionary and other specified funding

3. **Provision and Support of the Curriculum**
   - curriculum development
   - teacher development
   - provision of learning material

4. **Ministerial servicing**
   - Ministerials
   - Parliamentary Questions

5. **Payment of Salaries and Allowances**
   - payroll services
   - student allowances

6. **Provision of information to the education community.**

## Concluding Comment

While the original intentions of 'Education to be More' have been altered during the restructuring of early childhood education administration, the 1988 government goals of equity, quality, efficiency, effectiveness and economy have, however, remained firmly in place as the underlying principles for educational change.

The policy changes we have seen introduced between the Ministry of Education's May, 1988 goals and targets, and the Ministry's June 1991 outputs for early childhood education, have been designed to put in place the intentions expressed in 'Education to be More' within the framework of Government's goals for education.

In 1988 'Education to be More' contained an outline of steps to establish a more equitable system of early childhood care and education. 'Before Five' set out the then Government's policies. The framework was the goals for the state sector of equity, quality, efficiency, effectiveness and economy. These goals formed the base for the Ministry of Education's 1988 goal - to 'provide appropriate and high quality early childhood care and education for all who wish to have access to it'.

In 1991 the Ministry of Education goals for early childhood education are specific and defined in six outputs, each of which is designed to help achieve the present Government's goal of providing high quality, self-managing, affordable early childhood education.

A comparison of the current directions in early childhood education with the original intentions in 'Education to be More' shows that the new education agencies, the change in Government, the reviews of education and the 1991 budget decisions have all influenced the current direction for early childhood education.

For some people the current direction can be seen as not desirable. For others the direction is promising. One thing is certain, we still have some some distance to travel before we see put in place the equitable system of quality early childhood care and education envisaged by the Meade committee.

There is no doubt that there will be more changes ahead, there always are. Early childhood education, like everyday life, is not static, but is vital and ever-developing. As parents, staff and educators we want the very best for our children and our children's children. Whether our involvement in early childhood education is short, or spans many years, we each aim to improve the services and support that we have in New Zealand for families with very young children. Let us continue to work together to put in place an early childhood education system that meets the needs of all our families and fulfills the aims and the vision in 'Education to be More'.

Toi tu te whenua, whatungarognaro he tangata - People come and go, but the land remains.

# THE CHILD'S RIGHT TO PLAY

5th EARLY CHILDHOOD CONVENTION, Dunedin, SEPT.1991
Beverley Morris

"Play is an educational process of fundamental importance and the birthright of every child". The 1989 adoption by the General Assembly of the United Nations of the Convention on Children's Rights recognised this proposition in Article 31. Though New Zealand was one of some 90 countries to sign this convention, it has not yet ratified this document which means being required to report on the status and state of children within New Zealand.

The message from the 1990 Tokyo International Conference on the Child's Right to Play was that for any positive results to be won in this area, dedicated adults must line themselves against the right-wing faction of competition and the " user-pays" philosphy.

Here we were meeting in one of the most advanced technological societies - Japan - and we were being told by Professor Fukuda, a Japanese delegate, of the misuse of their children's time. Because the places in the universities leading to the best jobs are fiercely competed for, children are losing their playtime. 60% of the 10 year olds in the cities are going on at 4 o'clock to "prep" schools to cram for entry exams, Saturdays included.

The German delegates were complaining of an abundance of organ--ised events which both take up and fragment children's free time. However the representatives from Third World countries reminded us that time for their children to play was severely limited by their need to find food and shelter for them to survive. Maslow's hierarchy of needs concerning survival and safety must be basic and yet the signs of playfulness break through at times. IPA President Robin Moore told us a story about a Brazilian child's diversion from begging by the sight of dust motes dancing in a sunbeam.

Brian Sutton-Smith mentioned that in some state schools in Philadelphia, recess,intervals and playtime have been eliminated on the grounds that these waste time at the taxpayers' expense.

## SPACE

Inadequate environmental planning has taken playspace away from children and is manifest in the dehumanising scale of settlements, inappropriate housing forms and poor traffic management. The Japanese were driven to thinking about using space under elevated motorways for playgrounds but it was pointed out that poisonous fumes from the traffic could affect children's health.

In Nagoya the pre-conference tour party was taken for a picnic at a wilderness area in the middle of the city where there was a lake, with swamp area and much native foliage. The city planners wanted to develop squash courts and other facilities for adults but positively responded to a petition signed by IPA delegates from 20 countries to preserve this for the play and education of the neighbourhood children.

Hongkong has squeezed space out of their crowded territory for a theme park based ironically on a Voyage to the Moon but at least the designers were thinking of something adventurous.

At Sendai a new city north of Tokyo we were taken through a large space put aside for a playground catering for disabled as well as "advantaged" children. It specialised in crafts made from the park plants.

## COMPANIONS

While playmates are necessary for some games, they are crucial for learning social skills and for democratic order to be sustained. In the Western world with diminishing birth rates these peer groups are thinning out and the vertical structure of all age groups made possible by street meetings means that transmission of folklore is disappearing, its place taken by the television culture.

## ADULTS

Adults who work alongside children at play must receive training to understand their role as "leisure-time pedagogues" as the Scandinavians call them. In the same way that adults develop children's speech by talking with them, they also have to play with children if their ability to play is to develop. The adults need to know when to stand back. Sutton-Smith spoke at the IPA Tokyo Conference of adult supervision without trespassing the child's right to play. Some play intervals in U.S. were being controlled and converted into physical education lessons. (There was a worse alternative- by regarding this as the teachers' coffee break and getting the older children to "police" the playground).

The child's right to play is being increasingly defined as the right to play organised games and here in New Zealand I have come across a "nursery" level of rugby for four year olds! The Hillary Commission has developed Kiwisports concentrating on ball-handling skills to negate the emphasis on organised games. There is a positive trend towards cooperative games in early childhood centres in NZ and other parts of the world.

## SAFETY

The child has the right to play in safety- NZ has made a good start by adopting a safety standard, incorporating a two-metre height in structures and surface restrictions under climbing sets. However Dr Tom Jambor, a delegate from USA, reminds us that children are explorers of boundaries so we must not take away too many challenges. Safety limits have been judged by grown-ups and we must choose some leeway for those children who radiate confidence and wish to try to extend themselves. On the other hand we have to insist that those in charge of play areas take a strong view on the physical and mechanical maintenance of play equipment and grounds for accidents will occur despite vigilance.

## TRAFFIC

When I interviewed 100 mothers recently on their childrearing practices, I asked them about the child's going across the road to play. I was surprised at the furore this aroused in terms of the school-aged children. But then I remembered that the density of traffic and speed of cars have increased, that in Scandanavian countries children are not assumed to have traffic sense under twelve and that no longer can one trust children to play out "on the street".

For children to be allowed to play in neighbours' homes quite formal arrangements are made by phone to check if it is convenient for the hosting mother. While it is realistic to worry about the social niceties, behind this concern is a fear of kidnapping and potential child abuse.

## SEX ABUSE

There have been sufficient horrific cases in New Zealand to make parents wary, though it is recognised that sexual molesters are usually known within the family circle, relatives and "friends". Hints that a child is subject to sexual abuse are apparent in the play history of that child and can be identified by a professional observer.

## HOSPITAL PLAY

Sick and disabled children have a right to play as far as they are capable - in fact play is part of the therapeutic process. Specialised staff should assist the parents and nurses and there should be equipment and material available to promote play once the child has signified an interest.

## TOY LIBRARIES

Because many of the toys that keep a sick child entertained are expensive, toy libraries that lend such playthings can be found round the country. There are many children in the community whose parents cannot afford money out of a stretched budget but find the low lending fee for toys to satisfy a developmental stage. These need to be balanced by inexpensive play materials like sand and water.

## WAR TOYS

The child has a right to expect a peaceful world to grow up in. PLAY for LIFE believes that we can model a world of peace by discouraging the use of military toys. While legislative measures on safety standards for toys has been passed in New Zealand, Associate Minister of Health, Katherine O'Reagan has declined to implement the voluntary code of practice recommended last year by the working party. Consumer and industry representatives were briefed to develop a voluntary code of practice on the advertising and packaging of toys that promote violence. The recommended code would have prevented the advertising of realistic-looking toy weapons.Toy weapons are one way in which we as a society legitimise and condone violence.

## RACISM

Violent and ignorant people look for a scapegoat to unleash their power on and too often the victim is an ethnic minority. From the age of three children are beginning to form attitudes towards people of other races. Adults working with children need to acknowledge cultural differences in language and customs and immediately typify racist behaviour as unacceptable and discriminatory. They know that the child has a need for self-worth and how much depends on the recognition of the child's cultural background.

## SEX-STEREO-TYPING

Another barrier to a child's right to play is the designation of play on a gender-basis. Especially in the computer world boys may be given preference over girls, as they once dominated block and adventure play. With the training of early childhood teachers going more thoroughly into this area, there is a greater chance that the mismatch in play and education will be rectified.

## COMPUTER-GAMES

While acknowledging the place of video games as a leisure-time activity for many children, we can question the value of limiting the physical exercise to one hand for too long and the mindless results of repeatedly blowing up another machine or worse still, a human being. It is hardly an adventure or a lesson in how to be sociable.

## CREATIVE PLAY

The child has a right to be creative in many ways and will do so within the natural environment. Sometimes the material for creativity has to be provided by the adults and will be varied from clay and wood to words and ideas.

With few play resources but with "free" creative tools such as body language, music, humour, recycled clothing and newspaper, highly effective results can be achieved, especially with a lead from playful adults.

I can't help but feel sad about schools where work is differentiated from play, where to be taught is differentiated from to learn, where to copy is differentiated from being creative.

Children have a right to sympathetic adults - whether they be parents, teachers, policy-makers, or administrators. We can learn from the most industrialised countries in the world -"we can't screw off the children's heads and send them to school"!, this was a comment by a Japanese delegate to the 1990 IPA Conference.

We must deal with the whole child and respect the child's right to play.

# CAMPAIGNING FOR AND RESEARCHING, NURSERY PROVISION FOR UNDER TWOS IN BRITAIN

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## Campaigning

Some of us in Britain have been campaigning for over 20 years for the provision of nurseries.[1] When I first tried to get a nursery established at my place of work in 1969, there were very few or no workplace college and community nurseries in existence. (There were nurseries for the children of working parents during the second world war but these closed down almost immediately the soldiers returned home so that the jobs that the women had been doing could be freed for the men. ) Even now the number is still low and the ones that are in existence are mostly in the South East of England, the wealthiest area of Britain. The organisation "Working for Childcare" estimates that altogether there are only about 160 of these in the U.K. (E.O.C. 1990).

## Numbers of women working

However, despite the lack of increase in publicly funded provision women are still returning to work in greater numbers. The most recent figures (1986) show that 50% of mothers are working. (This percentage has remained static since 1975, although between 1971 and 1975 , there was a 10% increase over the 1971 figure of 40% of married and lone mothers working.)

Table 1

Married and lone mothers with dependent children, in paid employment, 1971 and 1975 -86. Great Britain

| Year | Married Mothers | Lone Mothers |
|---|---|---|
| 1971 | 38.6 | 51.6 |
| 1975 -76 | 50.0 | 49.0 |
| 1977 -79 | 52.0 | 47.0 |
| 1979 -81 | 52.0 | 49.0 |
| 1982 -84 | 49.0 | 39.0 |
| 1984-86 | 52.0 | 42.0 |

Source: Census 1971 and Household Survey

Comparable figures for Sweden (Melhuish and Moss 1991) show that in 1986 ,62% of mothers with pre-school children were employed,- and a personal communication this year ,with Soren Kindlund , in the Ministry of Social Affairs told me that current figures for Sweden showed that 85% of mothers were working; Another 5- 8 % were in education. But, unlike Britain, childcare provision has also increased commensurate with the increase in working mothers. In 1987 19% of children under 3 were in nurseries, compared with 1% in Britain (Melhuish 1991). (In 1989 in Sweden a law was passed guaranteeing, where the parents desired it, every child (between 18 months and school age) , a publicly funded place by 1991. )

Other figures show that by the end of the 1980's in Britain about two thirds of mothers who were in work when they became pregnant were economically active within 9 months of having their babies.[2] (MaCrae and Daniel 1991) ( Maternity Rights 1979 PSI report. In 1988 they repeated their survey on mothers and in 1979 on employers.) See Table 2

This seems to have resulted in an increased demand among mothers for improved childcare facilities, enhanced maternity rights and more flexible working arrangements. 60% of mothers who replied to a questionnaire cited improved childcare facilities as the improvement they would like to help women continue working.

At the moment, because of the lack of publicly funded provision , mothers depend on fathers, grandmothers, their relatives and friends and there has been a substantial increase in the use of childminders.

Thus we can see that in Britain the number of mothers who go back to work after having a baby are increasing and the increase in full time working is proportionately greater than the increase in part-time working. Like Sweden they are continuing in their previous jobs. Thus the need for childcare is not going to go away. ( But childminding may not be the answer, to childcare problems in the future. In Sweden childminders can no longer meet the need.)

The trend for mothers to return to work has increased despite the lack of policy initiatives to support it.

Changing attitudes

It is clear we are still massively behind other countries in Europe in publicly funded provision for under twos and in the provision of childcare that suits the needs of working parents, We hope that the recent campaigning focus on Europe provided by organisations such as "Childcare Now",may help attitudes to change. If we look at the change in attitudes shown by surveys over 25 years ; in 1965 78% of mothers thought that mothers of preschool children should not work . By 1980 this number had decreased to 60% , but still leaving a majority of mothers apparently against mothers working. But a Daily Telegraph survey in 1990 (E.O.C.1990) found that 88% of their respondents thought that government should increase childcare facilities for working women, so it looks as if attitudes are changing.

But there is still a lingering view that daycare is harmful to children despite evidence from international studies to the contrary. Melhuish and Moss (1991) draw the conclusion that day care for under twos does not necessarily have harmful effects. The strongest evidence for this comes from Swedish research. This suggests that children who have been in daycare before the age of one are more likely to achieve well in school than those who have not had such out- of- home care. When research was carried out to see whether differences between nurseries or differences between the children's home and family circumstances led to differences in outcomes it was found that the only differences found concerned differences in family circumstances. The researchers hypothesised that this may be because care in Swedish nurseries is of a uniformly high quality and all may have reached a necessary threshold level for providing"good" quality care. They suggested that in terms of the ECERS. The Early childhood Environment Rating Scale,(Harms & Clifford 1980) a measure developed in America for evaluating nurseries, all their establishments obtained high scores.

We are not fortunate in having good provision for under twos in Britain. Here the current background to provision has been dominated by Belsky's (1988) recent research review and by some of the developmental psychological research on early language development.1

Melhuish's study

Melhuish (1988), for instance, studied children in nurseries2 as part of a larger project on "Children's experience of different types of daycare at 18 months".

The study aimed to make overall comparisons of the experience of 18 month olds in different daycare settings. The measures used were observational. Two separate one hour observations were made of the child in the daycare setting. " The observations were scheduled to occur during 'free-play' periods when the child was active, and to avoid scheduled routines such as meal times.... The observer recorded behavioural codes in a lined 'shorthand' notebook, each line representing 10 seconds." (Melhuish 1988 pp3,4). A pocket bleeper provided timing signals. Observations were focused on the study child. The observer kept a sequential record of the child's behaviour and that of others as they impinged on the child.

When "communication to and from the study child" was considered "communication to the study child" was most frequently by language utterances. There were fewer utterances to the children in the nursery group. When "communication from the study child" was considered this was usually by non-language utterances and the nursery group showed lower levels than other groups.3

I was unhappy with the reported conclusion that children in nurseries have fewer contingent reponses than children in their own homes and fewer language communications from staff and other children.It seemed that these apparent results could be used as another reason not to provide daycare.

It seems that this is only too easy in English speaking countries. Tobin et al (1990) in a book comparing three cultures, Japan, China and the USA recounts the psychological literature that has influenced attitudes against daycare in the States 4 and the recent British EOC (1990) report (Action Plan for Childcare) pp38,39, discusses how similar psychodynamically inluenced sources have affected childcare professionals and become reflected in government policy in Britain.

Were Melhuish's results,where nurseries were poorer than homes due to, as Melhuish had suggested himself, nurseries providing a poorer environment because of being badly resourced etc.? If so one might expect better resourced nurseries to have better results. (One might expect nurseries to be unable to provide the same level of communication from the staff because of the polyadic nature of communications in a group rather than the dyadic relationships which are easier to provide in a home. Still; there is the possibility of child -child

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1 Psychologists have recently stressed language development and exposure to adult talk as a major aspect of cognitive development. ( Piagetian ideas have recently been elaborated in Britain in terms of children's schemas,(Athey 1990),and David Wood's (1988) has developed ideas derived from Vygotsky (1962.1978) of zones of proximal intervention.)

2 The study was concerned with "private" nurseries because they were looking at daycare used by dual earner households and such households are not usually eligible for places in local authority nurseries.

relationships in a nursery and one might still expect the nature of communications to vary with the quality of the nursery.)

There is evidence from other studies 5 that quality of nursery appears to link with the quality of the children's language communications.

Initially I was interested in using Melhuish's methodology and trying to replicate aspects of his research to see if one could reach different conclusions from the ones reached in his research, that children have fewer communications in nurseries than in homes.

Parents who are interested i3n finding out-of-home care for their children are not just interested in finding the best of a range of poor quality care but in finding provision that can provide educare to a standard the same or better than they can provide themselves. Thus, I believe, the research questions should also be aimed at finding ways of evaluating provision so that it can be improved.

For these reasons I tried to find nurseries that provided a baseline of good quality care before I looked further at the quality of interactions between staff and children and children and children. In Britain this is difficult to do, as overall there is very little provision of nursery care for under twos.6 However the provision in London is higher than the national average, and over the past four years I have been carrying out exploratory observations in a number of London nurseries of various types.

I first wanted to investigate whether language interactions would vary with quality of nursery. I chose nurseries that were relatively well resourced materially, that had co-operative relationships with parents ( two workplace, and one community nursery, and one hybrid? local authority nursery. All had reasonable staff child ratios and staff with NNEB training. I used Melhuish's method -observations for an hour with the same 18 month old child on two different occasions.

I selected four nurseries7, (pseudonyms :Cindy , Harrow, Flint and Marina) to study in some detail because potentially they were better resourced than some other private non-profit nurseries. They filled the criteria for feminist provision in that they take children of mothers who work. (Local authority, publicly funded nurseries do not. They only provide for children "at risk", or the children act's definition, "in need".)
I made these decisions on the basis of having visited a number of other nurseries and evaluated them using the ECERS (Harms & Clifford (1980) and had also had reports of a number of nurseries in the London area from many nursery workers who had attended my in-service courses.

I looked at language and I explored features of the organisational and institutional setting which had been suggested by both earlier research and by practitioners as being

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3 Means for the daycare groups

| language communication to child | Home | Relative | CM | Nursery | p |
|---|---|---|---|---|---|
| frequency/hour | 249 | 223 | 187 | 102 | <.001 |

from Melhuish E.C children's experience of different types of daycare at 18 months important in relating to the quality of educare for the child. Initially I was interested in organisational aspects such as: 1) the physical setting, spatial organisation and the grouping of children, (e.g.whether open plan or age grouped , and 2) Ethos, keyworker systems, staff training, staff stability and staff autonomy.

I observed a child's day in the nursery and also asked about the perceptions of the workers as to how the organistion of the nursery and the day worked.

1) I used Melhuish's method making two separate one hour observations of the same 18 month old child in the daycare setting, recording behavioural codes.

2) I videotaped a morning in each nursery, in the baby rooms.8

3) I interviewed staff in the baby room about how they organised a day and what they believed to be important about a good nursery. ( In one case I showed the video to the staff group and asked for their comments. I have offered to do the same at the other nurseries. This "reflective ethnographic" method has been used by Tobin.1990)

4) I observed a morning in the nursery and used an American rating scale , the ECERS, (Harms & Clifford 1980) 1980) which has been developed and used in research in America ( tested for reliability in America)

## Section 2

## Results

In the event when staff language interventions were measured using Melhuish's coding system the mean level achieved was approximately equivalent to that obtained by Melhuish. The mean of my sample was 114.87 language communications to the child per hour while that of Melhuish's sample was a frequencey of 102 per hour. However at Marina 183.45 communications per hour was above the mean of Melhuish's and at Cindy 49.83 communications per hour was substantially below.

Frequency of vocalisations from adult to child per hour per nursery

| | |
|---|---|
| Cindy | 49.83 |
| Harrow | 112.76 |
| Flint | 113.96 |
| Marina | 183.45 |

| | Melhuish | Mine |
|---|---|---|
| Language Communication to child frequency per hour | 102 | 114.87 |

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I had chosen relatively well resourced nurseries hoping to be able to show that results I obtained would be likely to be above the mean of Melhuish's sample but in the event my mean figures are only marginally higher. We need to look at the two anomalous results , Cindy and Marina..

Melhuish's coding method also allowed other aspects of the child's behaviour and interactions to be measured. I looked at:

Minimally engaged play and aimless wandering
Joint play;
smiling and laughing;
crying
aggressive acts

In only one (Harrow) of the nurseries of the four being discussed was there much sign of minimal engagement and aimless wandering. In this nursery just over quarter of an hour of the child's time could be categorised in this way. The others ranged from a minimum of a minute and a half at Marina, up to 6 and a half minutes at Cindy. Therefore for three of the nurseries , for most of the time the observed children were engaged in what they were doing. If one looks at joint play, when they were engaged in play with another adult or child, the results follow the same pattern. There was no joint play at Harrow while there was approximately 15 minutes spent in joint play at Marina. The others ranged from 7 minutes at Cindy to 11 minutes at Flint.

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Minimally engaged play and aimless wandering

| Average | Mins. per hour |
|---|---|
| Cindy | 6.46 |
| Harrow | 16.16 |
| Flint | 5.67 |
| Marina | 1.56 |

Aimless wandering duration in secs. per hour

| | Melhuish | Mine |
|---|---|---|

| | | |
|---|---|---|
| aimless wandering | 251 (4.18) | 229.1 (3.82 mins) |

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Therefore for three of the nurseries most of the time the observed children were engaged in what they were doing.

If one looks at joint play, when they were engaged in play with another adult or child, the results are as follows.

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Joint play, average per nursery in mins. per hour

| | |
|---|---|
| Cindy | 6.87 |
| Harrow | 0 |
| Flint | 10.45 |
| Marina | 12.79 |

| | Melhuish | Mine |
|---|---|---|
| Joint play secs. per hour | 168 (2.8 mins) | 451.6 (7.52 mins) |

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Smiling and laughing measured in seconds per hour give a mean of 92.3 for my sample . Melhuish measured the frequency of aaffection by the child and included smiling and laughing as part of this. His figure was 16 times and hour. In this case Harrow had the highest figure of 2.27 * 60 secs.

The amount of crying 40.6 sec an hour and number of aggressive acts 0.68 was low and substantially less than that found in Melhuish's sample, 134 secs. an hour of crying and 5.9 acts of aggression respectively.

There was no crying and there were no aggressive acts shown at Marina. There was no aggression at Flint.

Smiling and laughing, average per nursery in mins per hour

| | |
|---|---|
| Cindy | 1.36 |

| | |
|---|---|
| Harrow | 2.27 |
| Flint | 0.95 |
| Marina | 0.56 |
| Mean | 1.53 |

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| emotional behaviour | Melhuish | My sample | |
|---|---|---|---|
| affection by child hour (smiling and laughing) | 16 | 1.53 mins per | frequency per hour |

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Crying : average per nursery in mins per hour

| | |
|---|---|
| Cindy | 1.47 (includes one 8.7 episode of screaming) |
| Harrow | 0.53 |
| Flint | 0.22 |
| Marina | 0 |

| | Melhuish | My sample |
|---|---|---|
| Emotional behaviour. crying in secs per hour | 134 (2.23) | 40.6(0.68 mins.) |

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Frequency of aggressive acts per hour,average per nursery

| | |
|---|---|
| Cindy | 1.09 |
| Harrow | 0.47 |
| Flint | 0 |

Marina 0

| | Melhuish | My sample |
|---|---|---|
| Aggression frequency per hour | 5.9 | 0.68 |

## Means from my sample compared with those obtained by Melhuish.

Aimless wandering

| duration in secs. per hour | Melhuish | Mine |
|---|---|---|
| aimless wandering | 251 (4.18) | 229.1 (3.82 mins) |
| Language Communication to child frequency per hour | 102 | 114.87 |
| Emotional behaviour. crying in secs per hour | 134 (2.23) | 40.6(0.68 mins.) |
| Aggression frequency per hour | 5.9 | 0.68 |
| Joint play secs. per hour | 168(2.8) | 451.6 (7.52 mins.) |
| emotional behaviour | 16 | 1.53 |

affection by smiling child,( freq. and laughing per hour)
( Mins. per hour.)

(Mean Responsiveness 9

These results suggest that despite the similar means in language communications from staff to children between Melhuish's sample and my own, these other measures may show something of the happiness and concentration of the children attending the nurseries.

## Methodologiucal problems with Melhuish's method

Other issues were also raised for me as I carried out the observations.

1. When I identified to the members of staff which child I was observing. i.e any child that was 18 months old at the time of my visit, it seemed to me that in one of the nurseries that child was then given more attention by the members of staff (Harrow). This may have been at the expense of attention being given to the other children. This may be apparent by the lack of joint play and relatively high figures for non engaged play and aimless wandering, despite language communication being above Melhuish's average.

(This nursery later did not appear to be a happy one.The video taken a year and a half after the observations showed a baby being left to scream ( for two periods that totalled twenty minutes) in an upright rocking cradle while the staff got the room and the other children prepared for lunch.)

2. Also the free play period in nurseries may not be a comparable period to 'free play' in the child's home since this may be the period in some nurseries ( eg. High Scope ) where children will get least language interaction from staff. They are often allowed to choose freely from a variety of activities during this period and often will be in many different places, away from the staff. Large grouptime, small group time, dinner and changing times may be periods when children get more individual language interaction.

3. Also observing at free play periods may not necessarily be comparing comparable activities at different nurseries. ( e.g those that have more organised periods of structured teaching such as Sweden and New York)

I checked this hypothesis by doing observations at other periods, and got variable results.

At teatime at another nursery, Penrose where I was observing a 15 month old at teatime the MVI was only 26,94 the lowest score of all. However staff language may well be occurring at this time which is not picked up by the coding system because it is not directed at the observed child . However the video of Marina confirms that children may well be talked to while being changed.

4. Melhuish's coding system does not take into account when children learn from interactions taking place between others, as Judy Dunn (1985) has shown is possible. (Certainly my experience of being in a Swedish nursery where I did not know one word of the language before I arrived was that I could learn name and understand simple questions from the repetition at dinner times where the children were asked what they wanted to eat, and the fruit was identified for them "peron"," banan"," applesin", and from the singing and action games, such as, a version of "What's the time Mr Wolf?,and "Incy Wincy Spinder".(This could be classified under Melhuish's scheme as Group sing and does not necessarily count as a contingent language learning interaction.)

Also in the Swedish nurseries there were attempts to directly teach the children language, and this occurred outside the free play periods. They were, for instance, asked individually to name the colours of their tea shirts.

This confirmed for me that to understand the results I was getting it was necessary to look at interactions in context.

Section 3

Analysis

1. I initially looked at the possible influence of the architectural design and the organisation of the building, in particular open plan nurseries as against those where children spent most of their day in age grouped rooms ( where children were loosely age grouped into for example babies, toddlers, and 3-5's).

My earlier visits to an open plan nursery had suggested to me that it was not easy for the youngest children (up to two) who were able to move about, to make the interactions they appeared to be seeking. (Penrose). Although the children whose behaviour I was coding were younger which might have been part of the explanation , there were still low figures for language interactions in this open plan nursery too.

Thus one of the four nurseries I have looked at in depth (Cindy) was also open plan , in design and organisation. In the others the children were loosely age grouped in separate rooms, babies, toddlers and 3-5's.

There was the least language interaction at Cindy, despite staff saying what a happy place it was. There were some changes since I did the coded observations a year and a half earlier (check) but when an 18mth old child leaves the baby room they can still wander throughout the different areas of the nursery.

"Ethos" -
Richman & McGuire (1988) had suggested ethos was important in influencing the quality of interactions in a nursery.

Through unstructured interviews with the supervisor and members of staff I hoped to be able to make some assessment of ethos.

My initial impressions from the audiotapes is that this can be done. Staff at three of the nurseries say how they appreciate the nursery they are working in , (Marina, Flint and Cindy), and these nurseries could be regarded as having a good ethos.

An example of the fieldnotes of one mornings observations in one of the nurseries is given in (Appendix 2).

3. Bronfenbrenner's concepts are useful in helping to analyse the context. I loosely used the ideas of Bronfenbrenner (1989) to think about context . He distinguishes between various levels of systems( the micro, meso, exo and macro . He also argues for a phenomenologically influenced approach. He gives an example drawn from Lewin (1917) published at the end of the first world war, of soldiers describing how their perceptions of the terrain changed as they got nearer to the front line.

" what first appears as a lovely bucolic scene of farmhouses, fields, and wooded areas is gradually transformed. the forested hill-top becomes an observation post, its sheltered side the location for a gun emplacement. An unexposed hollow is seen as a probable battalion aid station. Aspects of the natural landscape that were a delight only a few kilometers back are now perceived as ominous; the frightening defile, the camouflage of trees, the hill that hides the unseen enemy, the invisible objectives to be taken, the place and moment of security after the fray - features of the environment that threaten, beckon, reassure, and steer one;s course across a terrain objectively undistinguishable from scenes just a short distance behind the front." pp24 Bronfenbrenner 19

Microsystem

The coded observations of the 18 mth old children's dyadic interations and the videotape of a morning in the baby room allowed interactions within the micro system4 to be observed. Thus the previous results give some information about the children 's dyadic interactions.

During the tape-recorded interviews with member of staff in the baby room they were asked how they perceived the organisation of the day at the nursery and in particular in the baby room and also how they perceived the organisation of the nursery.
If they did not spontaneously mention it, I probed during the interview to see if they had any special responsibility for any of the children. Each of them mentioned a keyworker system but further probing showed that in the different nurseries they understood it differently.
The Meso-system

However asking about organisational structures allowed me to build up a picture of the links between the child in its two settings, the child in the nursery and the child in its home -in Bronfenbrenner's terminology, the meso-system5. Bronfenbrenner is interested in the links between systems and calls them the meso system. In this case, when parents visit the day nursery ; settle children in, take and collect them, go to parents meetings, serve on the mamagement committee, they are forming inter-relations between the two settings in which the child is a member (home and nursery). Similarly where the nurseries organise home visits, staff also become part of the mesosystem and act as a link between the two setting of home and nursery , for the child.

keyworker/special person

When asked "Do you have any special responsibility for any of the children, the staff at Marina emphasized the importance of the keyworker system for the running of their nursery (for them it meant being assigned special responsibility for particular children) - Its importance for making bonds with the children and forming good relationships with parents. Marina in particular stressed home visits, settling in, the importance of key workers and the keyworker system for continuity for the child. They also try and provide links between setting for the child when the child moves rooms. They thus emphasize micro and meso system aspects and see the links. Both Flint and Cindy put less emphasis on it as a system though both assigned keyworkers to children when they first attended. Both mentioned that the parents saw it as more important than they, the staff, considered it to be. Otherwise the key worker was the keeper of records on the child. This seemed to be the only purpose at Harrow where there was no sense that there should be any special relationships developed with the child.

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4. A micro-system is a pattern of activities, roles, and interpersonal relations experienced by the developing person in a given setting with particular physical and material characteristics." Bronfenbrenner 91979 p22)

5. The meso-system is defined as a "set of interrelations between two or more settings in which the developing person becomes an active participant." p209

The importance of good relationships were mentioned by Marina,Flint and Cindy. All spontaneously said they have good relationships. At Harrow, in contrast they talked about the problems of high staff turnover.

They stressed record keeping at Marina as important for knowing about the child (quote). It was seen as important for reviewing the child's progress and the activities they needed to provide for the child. Flint kept records to share with the parents at periodic reviews. Cindy did not keep records, it seemed as a policy decision. Harrow did as they were required to , as many of their children were covered by Social Services requirements. Thus nurseries differed in how they used structures with the same names for different purposes, some so that it helped develop interactions between two settings.

### The exo-system

Bronfenbrenner considers two more system levels, the exosystem and the macrosystem:

The exosystem6 is a setting where the child is not an active participant, but one where, however, the child may influence the system, or the system may have an influence on the child. In nursery terms, I would see the planning meetings of the members of staff, the management committee, and the local authority, (through their setting of regulations) as being settings which may have an influence on the child ( e.g. through effects for instance on staff turnover -cutbacks or promotions etc. High staff turnover, may well have negative effects on the children. I think there is some evidence of this at Harrow,- the nursery seemed a less happy place when I revisited after a time gap of a year and a half during which there had been cutbacks and many staff vacancies and changes.

### Training as an aspect of the exo-system

Another likely aspect of the exosystem could be seen to be the system of staff training. There tended to be a similarity in the way in which many of the staff members talked about "putting out activities for the children". There was little sign of an educational, developmental view of what they were trying to do. This may be a possible consequence of their limited training.

Examples of how lack of developmental training can have an effect on interactions with the child can possibly be seen in the observations recorded at Flint.(see observations at Flint Appendix ) At Flint the workers in the baby room had changed in the 6 mths. since I had coded child staff language interaction and videoed in the summer. When I went back some months later the staff members had changed. They were well meaning but appeared to lack child developmental knowledge. Both members of staff showed interest in further education and training but did not think the nursery could afford to provide it.

Most of the staff in these nurseries had the two year NNEB training usually entered at the age of 16. Only in one was there an intensive programme of staff development with in-service training days arranged. So I believe training to be a very important aspect of the exo-system.

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6. " An exosystem has been defined as consisting of one or more settings that do not involve the developing person as an active participant but in which events occur that affect, or are affected by, what happens in that setting." p237 Bronfenbrenner 1979

Bronfenbrenner stresses that we do not just want to describe the micro, meso and exo system but also to look at effects on the child or the affect that the child has on the system.

I think the research can indicate some possible connections.

Marina with its emphasis on supporting relationships at micro and meso level also had a high staff child interaction level. Children seemed happy there. Looked at in terms of ethos - Staff were very positive about their nursery arguing their organisation worked and they would all want to take it elsewhere.

The Macro-system

Macrosystem7 differences became clearer after I had visited Italy, Sweden and New York, which I did early this year .

Sweden is startling to someone from Britain. The government states explicit values ( democracy,social and sexual equality, solidarity and responsibility ) from which a curriculum is to be derived. There is also a fundamental difference in the way the provision of nurseries is seen . 90% or more of parents are not at home with their children and it is assumed that children enjoy themselves in the children's centres. In Britain people often talk of parents dumping children in nurseries. This seems an inconceivable way of viewing affairs in Sweden. Childcare,there, is seen as a collective responsibility of the state not just of parents.

In Italy nurseries have beautiful spacious interiors, decorated cared for rooms dedicated to ensuring deep relaxed peaceful sleep for the babies, beautifully produced booklets describing their provision, which demonstrate to staff and parents alike that they are proud of what they are providing. There is an emphasis on continuous in-service training.

In Sweden the curriculum includes the provision of an enormous range of out door activities for all the children, including horse riding, skating, skiing and swimming, and for 18 month to two year olds. Also in Sweden deliberate thought for the children's language development was given through planned language games after a change in the training of their nursery workers in 1969 when a report came out emphasising the importance of language development. After this they had to have at least one preschool teacher working with group of 12 children under two , as well as two "barnkammeron", childcare workers, ( a pre-school teacher in Sweden has a 2 1/2 year training in Higher Education.) There is no similar training in Britain, for the majority of workers with young children. We have a four year graduate and post graduate training for nursery teachers who provide nursery education for three to give year old children, but nothing similar for those who work with the under twos.

Influence of macrosystem -comparison with Europe: Sweden and Italy.
Government support indicated by good provision and training would show staff they were supported by the community and it would be likely to affect their self esteem.

Self-esteem

The self-esteem of staff is one aspect that may be important in its effect on children,.

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7. "The macrosystem refers to the consistency observed within a given culture or subculture in the form and content of its constituent micro-,meso-, and exosystems, as well as any belief systems or ideology underlying such consistencies." p258 Bronfenbrenner 1979

The concept is speculative and difficult to measure. However we might expect those who feel disparaged themselves to disparage others and thus to affect the psychological health of the children in their care. ( This is not something we often talk about or that we often try and measure but it may be at the back of the minds of those who say that young children should not be in day care. The form that this concern often takes is a debate perhaps more obvious in the States,between those who want early educational daycare for hot- housing reasons and those who are afraid of the consequences of pushing children too early or making them feel failures at an even earlier age ( Margaret Donaldson's chapter on " learning to fail" in her book Children's Minds.)

### Staff well being

Both Sweden and Arezzo show evidence of concern for staff well being. In Sweden, for instance, there are some high tables and specially designed high chairs so that workers backs are protected. In Italy stools were provided for the older children to climb up to the changing table, for similar reasons.

### Unions

Unions have been influential and successful ,in both of these countries, in improving conditions for staff. There is no similar strong organisation in Britain. Either workplaces are non-unionised or fragmented between unions, nalgo, NUPE. NUT etc

### In Britain

So in the British case, appreciation of one's worth will rest more individually on relationships with parents or relationships with supervisors. There is no general framework of support. Therefore individual nurseries may be very different and nurseries may change quickly as one member of staff leaves and another replaces them. The supervisor of a nursery may well play a crucial role in holding it together as a stable organisation. (In this sample staff at Marina, Flint and Cindy spontaneously comment that they think the atmosphere in there nurseries is good, and that they are happy working there.)

In Britain this kind of support would have to come directly from their supervisors (and some nurseries did mention the importance of supervision sessions with their supervisors.) or from the parents ( again some of the staff in the interviews described how they became good friends with the parents.

### Conclusions

### Reasons for researching.

Women who want to work also want to be assured that their children are able to be happy and confident, to develop and learn and to enjoy their educare. Thus the reasons for researching are to try to find what factors contribute to the provision of good quality nurseries . We also want to be able to challenge the prevailing ideology that group care is bad for children under two.

I started out hoping to be able to show that nurseries for under threes can work, since conclusions of British government guidelines , have often been that children are better off with childminders despite Mayall & Petrie's (1983) research to the contrary. -some local authorities have interpreted them so that they refuse to allow nurseries for under twos in some area of

Britain.

The conclusions that can be drawn from the videotapes, observations, and recorded interviews show that staff can be caring and concerned for the children. They mostly have the appreciation of the parents. Staff often have a fair degree of autonomy. (e.g. There are usually staff representatives on the management committee.)

Parents will say that their children enjoy going to the nursery and at weekends will ask why they can't go. Even though it is often said that parents do not want to recognise bad care because they are often in a situation of no choice and to do so would mean that they had to remove their child from the nursery and give up work, in at least three of the settings I saw the children appeared reasonably happy and relationships with the parents were good. In the fourth nursery, Harrow, one parent came in and screamed at the staff for allowing his child to fall over and get hurt; their response was to say that they could not look after every child all the time!

However, despite such incidents,nurseries such as Marina demonstrate to me that young babies can enjoy their days in nurseries. They are able to relate to the other children. They can get to know and join in the group activities. They can learn and join in the action rhymes and songs, and they do not appear bored.

There are what appear to be good practices:- Marina's home visiting, settling in, keyworker system, and emphasis on continuity and providing links begween settings, seen to be reflected in happy children, joint and group play and staff interactions. What we have not got in this country is the institutional support that can make sure that such features become more than the "silent knowledge" of a few members of staff and that they become consciously known and stated. The developmental knowledge of staff could be improved. There could be a greater understanding of the nature of language learning . Training is important but it is often ignored.

This is where some of our campaigning focus now rests. We are currently writing papers to influence government and opposition on the vital importance of professional education and training for all nursery workers and this is why our campaigning focus recently has looked towards Europe where in many countries there is not just more provision but better quality provision which enjoys support from the population at large.

1. The history of campaigning in this country was of campaigning by students and lecturers unions the NUS and NATFHE, and white collar unions like NALGO,in the 1970's for an extension of college and workplace nurseries. The London Nursery Campaign was established at the same time to fight for community nurseries. In 1981 campaigners who were involved in these earlier campaigns came together to found the National Childcare Campaign.

The National Childcare Campaign was the first national campaigning body for the extension of daycare.

The 1980's

It was the EOC and the trades unions who gave the first grants to the NCCC. In the 1980's we lost the impetus of the unions.

Unions in the 1980's were under attack. The trades union movement became involved in fundamental support of existing pay, conditions and organisation and had little time for pushing what were seen as women's issues.

Only now in the 90's is there a perceptible feeling of change.

2. Nearly one half were back at work within that time. Over the last ten years women are more likely to return to full time work after having a baby. ( fig 3, PSI). Also women are likely to return to work the more they are paid and the more senior their jobs. (PSI 1991)

3 Responsiveness was measured as a proportion of study child communication followed by an adult communication within the same 10 second period or the first behaviour of the next 10 second period. The overall responsiveness measure which combines all the types of communication showed lower responsiveness in the nursery than in the home group and other groups.

4 "Sigmund Freud's theories of child traumatization: Anna Freud's work on orphaned, group-reared Holocaust survivors (Freud and Dunn, 1951); Rene Spitz's writings on institutionalized children's failure to thrive (19650; the Robertson's films (1967, 1968), which show children deteriorating rapidly after brief separations from their parents; Bruno Bettelheims writing on infantile autism (1967); Margaret Mahler's assertion that the child must feel in control of the process of separation and individuation (Mahler et al., 1975); the Harlows; experiments with mother-deprived monkeys (1962); John Bowlby's books on attachment and loss (1980) - all these and other studies are cited as evidence in the case against institutional child care and against working mothers of young children. Child-development scholars including Selma Fraiberg (1977) and Burton White (1985 a, 1985 b) have written books for general audiences that warn of the dangers of precipitately separating children from their mothers. Recent works by Vivian Suransky (The Erosion of Childhood, 1982) and Sylvia Hewlett (A Lesser Life,1986) have drawn on psychodynamic and economic studies to criticise the feminist movement for placing the needs of women over what is best for children." Tobin 1990 p181

5 Peterson and Peterson (1986) found "children from high quality centres were more similar to home reared children than to children from low quality centres in compliance and verbal interaction. Children attending poor quality centres were more likely to have verbal interaction limited to numerous single statements."

Vandell and Powers (1983) found that "Day care quality defined in terms of adult-child ratio, educational level of the teacher and toy availability was found to be clearly associated with the children's free play activities. Children in high quality nurseries had more positive interactions with adults. Children in low quality nurseries spent more time in aimless wandering and solitary behaviour.

Phillips, McCartney and Scarr (1987) found that measures of caregiver verbal interaction were among the most consistent predictors of the children's social development in child care as rated by parents and caregivers.

## 6 Nurseries for under twos in Britain

In Britain we have very few nurseries for under twos and there are many factors which make it difficult for them to be of high quality.

However if one wants to research the settings in which working parents leave their children then it is nurseries such as the ones I have described that working parents will be using.

1. Training of staff
   Most daycare institutions cannot afford staff with the longost and highest level of education i.e. nursery teachers. Even where they can , in for instance the London Borough of Islington, where they have put nursery teachers in charge of their new combined centres, nursery teachers are not trained for under threes or for issues around running the longer day which a combination of daycare and education involves.

2. There are no publicly funded nurseries for under twos for working parents. The publicly funded nurseries that take children under two will only take children at risk. Therefore the choice for working parents are: workplace nurseries,( where there may sometimes be an employer's subsidy but are usually still expensive and used by wealthier parents) ; a few non- profit community nurseries, which may sometimes get partial grants from a variety of charitable sources including local authorities,; and a very few for- profit nurseries.

All of these , for a variety of reasons are trying to keep costs as low as possible. As most costs are staff costs this often means staff are paid at low rate of pay. Public sector nurseries have fixed rates of pay. Others do not.

There is often little money for premises and materials_ It can mean making do with a prefabricated building, cramped for space inside, and with no or little outside play space.

Other research (H.Penn) has shown the constraints under which most private nurseries run. They have no or very little money for staff training and initial training of nursery workers in Britain is very basic. Although we have good education and training for nursery teachers, they do not work with children below the age of two. Nor do they work in day nurseries. So some children may be in childcare settings where there is very little educational, psychological and developmental expertise, and these are usually the settings in which children will spend the longest days. (nursery schooling is usually part time probably no more than three hours a day.)

7 Cindy is a 25 place nursery with 10 staff, all qualified NNEB's ( a 2 year qualification usually taken at the age of 16). There are 2 staff in the baby room looking after 6 babies up to 18 mths old. The children are almost all the children of professional parents and fees are expensive £495 a month. The nursery is mostly open plan. It has been open for three years. Since I first visited at its opening it has become less open plan. It had a separate baby room but they have now also introduced a separate 3-5's room.

Harrow is also relatively new. It was set up when the GLC (Greater London Council) still existed and when there was pressure for the expansion of workplace nurseries . It was originally intended for workers in a South London Borough but recent funding difficulties have meant that 10 of its places are now allocated to priority children ( children at risk).

It is a 30 place nursery which currently takes 27 children because of funding difficulties. There are 7 children in the baby room looked after by 2 members of staff, a toddler room with children from 2yrs - 3 1/2yrs old with 10 children to 3 members of staff and a pre-school room with children from 2 1/2 - 5 years old with 10 children to 2 members of staff.

The different aged children are in separate rooms but spend a large part of their day in the garden when they are often all together.

Flint has been open five years. It was also established by campaigners many of whom worked in publishing and newspapers. It is a 24 place nursery with 7 members of staff, NNEB trained.

There are 6 children in the baby ( 3 mths - 20 mths) room with 2 members of staff. They operate on a ratio of 1:3. A toddler room (20 mths - 2 1/2 yrs) ratio 1:4 with 8 children and two staff and a 2-1/2 yrs. - 5 yrs. room with 10 children and two staff (ratio 1:5) . Again the children they take are mostly those of professional parents but Camden are allocated 5 places by currently only use 3. The fees are expensive, £135 a week.

Flint too is organised in separate rooms but only has outside space on the roof or makes use of a local park so children here do not meet together in the same way they do at Harrold Road. If staff want to take out children then it was explained to me 3 staff can take out 3 children each , with a double buggy and a baby in a sling on each of their backs.

Marina is longer established, one of the first community nurseries, offering access on a first come first served basis to those who lived within a limited geographical area bordering the nursery. Marina aimed to combine care and education but came up against different pay and conditions of two groups of workers, so had to establish an under threes nursery and a 3-5 nursery school with extended day.

Marina is a larger nursery and takes children and staff. There are 6 children in the baby room (0 - approx. 18 mths).

When they go in the garden they can meet the children from the rest of the nursery.

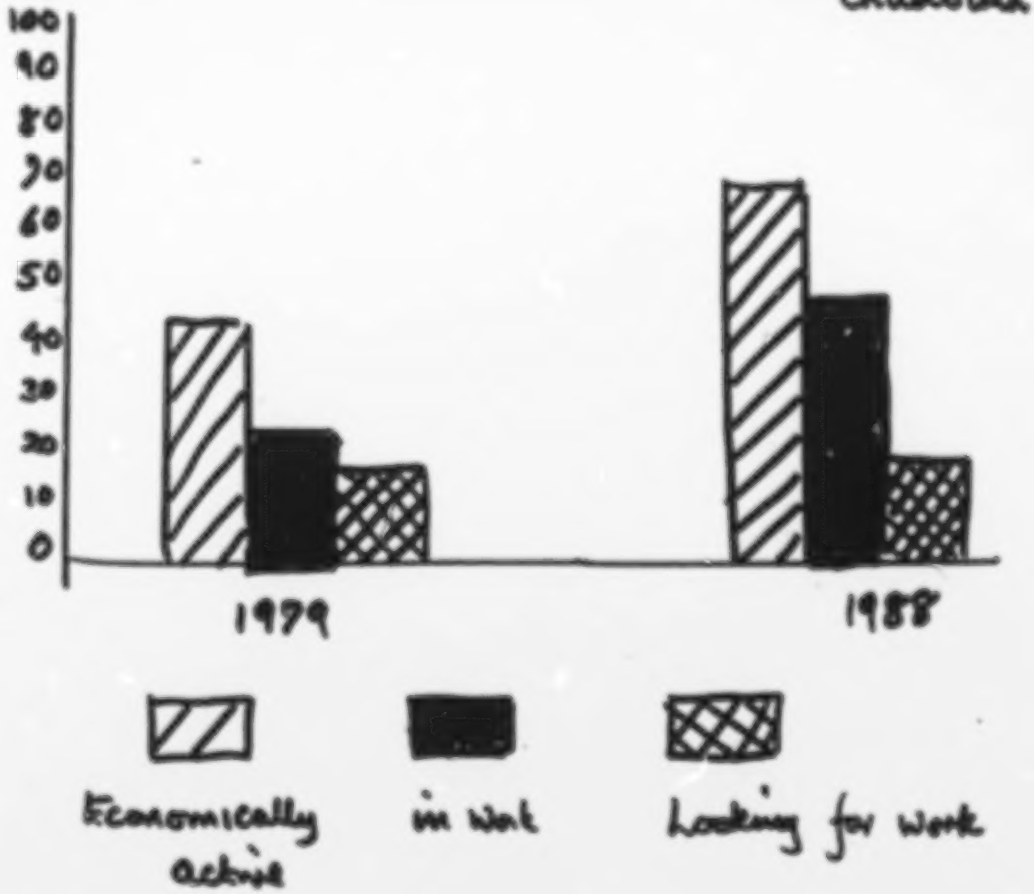
8 All the nurseries have been offered access to the videos. Marina have kept a copy for themselves. Harrow have not arranged a day for them to see the video. Flint arranged a day then cancelled. The offer has been made to Cindy but there has not yet been time to organise a showing.

9 Mean Responsiveness

| | Cindy | Harrow | Flint | Marina | Mean |
|---|---|---|---|---|---|
| Gestures | | | | | |

| | | | | | |
|---|---|---|---|---|---|
| | 45% | 50.6 % | 40 % | 60 % | 48.9% |
| range | 14% -100% | 37% -75 5% | 0-40% | | |
| non-lang vocalisation | 50.2% | 66.3% | 45.5.% | 61.55 | 55.9% |
| range | 16% -83% | 55% - 75% | 25% -66% | 58% -65% | |
| lang. vocalisations | 62.5% | 49.5% | 23.5% | 60% | 48.9% |
| range | 0% - 100% | 28% -71% | 22% -25% | 20% -100% | |

Economic activity among mothers within nine months of childbirth



From McCrae & Daniel 1991
Maternity Rights PSI report.

Table 2

# SCRIPTS FOR CHILDREN'S LIVES: WHAT DO PARENTS AND EARLY CHILDHOOD TEACHERS CONTRIBUTE TO CHILDREN'S UNDERSTANDING OF EVENTS IN THEIR LIVES?

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(N.B. This is a working paper. Please do not quote without conferring with the writer.)

The belief that parents and early childhood teachers separately and jointly play important parts in children's lives is a widely held one. Most theories of human development explicitly or implicitly state that interaction with adults is critical for the development and maintenance of social, emotional and cognitive growth in infants and young children (e.g. Wertsch, 1985; Bruner, 1968). In research on children's social development particularly, there has been a growth in interest in how experienced social interactions mediate the development of social skills and of knowledge about the world (Light, 1987).

One concept that has acquired increased currency in this type of research is the notion of "scripts". Simply put, a "script" is a way of describing the knowledge a person must have in order to understand what a given situation demands in the way of an appropriate response. For example, Joan Grusec (1983) argues that in order for a child to engage in altruistic behaviour, such as showing concern for others, that child must first understand that a situation requires concern for others to be shown. The child must also know how that concern for others should be put into effect. In other words, the child has to have a 'script' for altruistic behaviour which specifies the appropriate sequence of events in a particular context.

This paper reviews some of the literature on how children acquire 'scripts' for social behaviour through interaction with others. Some departures from "script theory" are then discussed followed by a section which presents a few illustrative examples of studies that have used the notions described in the theoretical part of the paper. The final section outlines a project seeking to investigate the contributions made to selected children's event 'scripts' by one of the child's parents and one early childhood teacher in an early childhood centre attended by the child.

## The Notion of 'Scripts'

The first people to use the notion of 'scripts' in an attempt to develop a theory of how people organise knowledge to help them behave appropriately in a particular situation were Roger Schank and Robert Abelson (1977). Schank and Abelson distinguished between "general knowledge" and "specific knowledge".

"General knowledge" is the knowledge we use to understand those actions of others that arise because they, like us, are human beings who share certain needs that are fulfilled in certain standard ways. Schank and Abelson (1977, p. 37) give the example of a person asking for a glass of water. The person who receives the request need not enquire why the water is wanted; even if the water is later used for a non-standard but clear purpose, such as to be thrown in another person's face while that person's watch was stolen, nobody would have trouble understanding what happened. Though this particular sequence of actions may not have been witnessed before, our "general knowledge" about people allows us to understand why the water was needed and what had happened.

"Specific knowledge", according to Schank and Abelson (1977), is knowledge which allows us to understand and behave appropriately in events we have experienced many times. Detailed specific knowledge about situations makes us more efficient in processing information in frequently-encountered events. An example of when "specific knowledge" is called upon might be in the situation of going to the theatre. Schank and Abelson (1977) argue that if we possess "specific knowledge" about the event of "going to the theatre", we will know that we need to show our ticket to be allowed in and that an usher is likely to direct us to our seat. Thus, if the person who looks at our ticket says "second aisle on your right" we are unlikely to answer "what about the second aisle on my right?" or "where is my seat?"; rather our "specific knowledge" about theatres allows us to understand and appropriately respond to what would otherwise be very cryptic and potentially confusing remarks.

According to Schank and Abelson, this type of "specific knowledge" is possessed by every mentally competent person in the world. Furthermore, "specific knowledge" exists for every standard situation or event that a mentally competent person experiences many times. The form this "specific knowledge" takes is called a 'script', defined by Schank and Abelson (1977) as:

> ". . . a structure that describes appropriate sequences of events in a particular context. A script is made up of slots and requirements about what can fill those slots. The structure is an interconnected whole, and what is in one slot affects what can be in another. Scripts handle stylised everyday situations. They are not subject to much change, nor do they provide the apparatus for handling totally novel situations. Thus, a script is a predetermined stereotyped sequence of actions that defines a well-known situation. Scripts allow for new references to objects within them just as if these objects had been previously mentioned; objects within a script may take 'the' without explicit introduction because the script itself has already implicitly introduced them." (p. 41)

A few further notes about 'scripts' are worth mentioning at this point. Firstly, 'scripts' are held to be responsible for filling in the "obvious" information that is not explicitly stated within a given situation. For instance, in the statement "John went into a restaurant. He ordered a Big Mac", it is not stated what John ate but people familiar with the script of that statement would have no difficulty working out what John's taste buds had been treated to!

Secondly, every script has a number of roles associated with it. These roles are assumed whenever a script is called up even if no specific mention of a particular person occupying a given role has been made. Thus, to use the same example of the restaurant script discussed in detail by Schank and Abelson (1977, pp. 38-50) in the statement "John went to a restaurant. He asked the waitress for coq au vin", the use of the defining article in "the waitress" is possible because by placing John in a restaurant, a script had been called up which implicitly included the presence of a waiting person.

Another important characteristic about scripts is that they are written from one particular role's point of view (Schank & Abelson, 1977, p. 42). Thus, in our use of the example of the restaurant script, we have operated with the customer's perspective of this script. The waiter, or the restaurant owner, would each have their own different script of the restaurant which would all need to be considered if one wanted to achieve the 'whole view' of the restaurant. As Schank and Abelson (1977) point out, such a 'whole view' is hardly ever needed if one is only interested in producing behaviour appropriate to a given situation.

### The Use of Script Theory in Developmental Literature and Some Departures

In Schank and Abelson's (1977) work, the notion of 'scripts' was used as part of a model for a computer system for understanding discourse. In their model, a 'script' is the basic level of knowledge representation in a hierarchy of representations that proceeds upwards from 'scripts' to 'plans' and hence to the abstract levels of 'goals' and to 'themes'. They note that the notion of 'script' is not meant to characterise all social knowledge and this is why they use the other concepts; however, the notion of 'script' is one that they say is easiest to explain and describe.

The concept of 'script' is one that has appealed to many developmental researchers. According to Hartup et al. (1983), the concept has now been "elaborated to denote hypothesized, abstract cognitive structures that, when activated, facilitate comprehension of a variety of event-based situations including ongoing social interaction" (p. 86). Collins (1983, p. 121) talks about scripts or "schemata" as "groupings of actions that are called into play when key parts of the action or characteristic settings are encountered" and Grusec (1983) says that scripts offer a way of understanding how children learn to behave in specific ways. 'Scripts' then are understood to include expectations about the sequence of actions; they also specify roles and propose and define obligatory and optional actions (Nelson, 1981).

An aspect that is emphasised by users of script theory is that a script, or script knowledge, is acquired through social interaction. Script theorists see adults as providing the structure which supports children's acquisition of scripts. Nelson (1981) reports that Jerome Bruner (1975) has recorded detailed observations of mothers engaging in give-and-take games and later structuring request sequences in which the child's part is gradually more demanding. Using babies as his subjects, Kenneth Kaye (1982) describes how parents create "frames" in which the infant can function. "Frames" refer to structures that initiate, maintain and support adaptive functioning in the infant and can be seen to be very similar in concept to 'scripts'. For example, within the "feeding frame" usually established within the first two months of life, the components of the "frame" or 'script' would include the role of parent who provides the food (action) as well as warmth and tactile stimulation (props). Katherine Nelson (1981) notes that adults outside the home also engage in similar structuring activities with children; she cites a study by Dore et al. (1978) in which nursery school teachers could be seen to be consciously engaging in structuring situations for children and directing their activities within an overall school script. Nelson suggests that this structuring explains why very little of the day-to-day activity in day-care centres and nursery schools needs to be negotiated afresh. Each child, and adult, gets to know her/his part in the script. In this sense then, scripts may be seen as a mechanism through which children are enculturated into forms of behaviour and of relationships with others. Scripts are thus seen to be a very efficient socialising mechanism. They provide a shared knowledge base on which interaction with both familiar and unfamiliar others can be conducted.

At the same time, scripts are also seen as very efficient at the individual level: they are useful in simplifying the complexity of social interactions. By using scripts for frequently encountered interactional events or situations, the individual's attention is freed from the ongoing activity so that deviations from the anticipated sequence/routine can be more effectively focussed on (Hartup et al., 1983; Light, 1987).

Katherine Nelson, a notable researcher in the area of script theory, and Janice Gruendel, one of her students, have further proposed that a script may be considered the prototypical form of a "general event representation", that is "memory for events that is not specific to a particular experience but is a kind of generalised knowledge", "a cognitive model for experienced events" (Nelson & Gruendel, 1981, pp. 147, 134). In this form they are seen as serving to guide action, discourse and even thought in given situations. Examples from studies by Nelson reported in Nelson and Gruendel (1981) will be given in the next section to illustrate the notion of scripts and generalised event representations.

These dimensions of script theory have made it possible to look at the development of social behaviour as a process independent from notions of sophisticated role-taking, which, since Piaget, have tended to dominate the field. Paul Light (1987) notes that if one accepts the idea of scripted knowledge, then it becomes reasonable to hypothesise that a child may participate in scripted interaction in which much social knowledge is implicit but of which the child is not necessarily aware. This means that the ability to engage in role-taking, and make role-taking inferences, may begin to be seen as the result of, versus the antecedent of, participation in social interaction.

This view, of course, is consistent with theories of human development that posit interaction with more knowledgeable others as the basis for development. I am thinking here particularly of Lev Vygotsky's view that all knowledge is embodied in the action, work, play, technology, literature, art and talk of members of a given society (Wertsch, 1985). These elements of a culture are "psychological tools" which children can acquire through interaction with those members of society who possess them - the more "knowledgeable others" or, to use Jerome Bruner's (1975) term - the "vicars of culture". These notions link also to the socio-psychological writings of George Herbert Mead (1934) in which the individual's personality is seen as evolving from social experience which is internalised to produce the 'I'-'me' system:

> I talk to myself, and I remember what I said and perhaps the emotional content that went with it. The 'I' of this moment is present in the 'me' of the next moment. There again I cannot turn around quick enough to catch myself. I become a 'me' in so far as I remember what I said. The 'I' can be given, however, this functional relationship. It is because of the 'I' that we say that we are fully aware of what we are, that we surprise ourselves by our own action. It is as we act that we are aware of ourselves. It is in memory that the 'I' is constantly present in experience. We can go back directly a few moments in our experience, and then we are dependent upon memory images for the rest. So that the 'I' in memory is there as the spokesman of the self of the second, or minute, or day ago. As given, it is a 'me' which was the 'I' at the earlier time. (Mead, 1934, p. 174)

In Mead's view then, the 'I'-'me' system is the mechanism by which the person relates to society. It is what gives people the ability to be self-reflexive as well as the ability to take on social roles. Mead himself did not often discuss how children develop; however, the implications of his thinking for a theory of (social) development are becoming increasingly discussed (e.g.: Valsiner, 1989; Light, 1987). Light (1987) indeed suggests that it is likely that the search to understand social behaviours such as role-taking will lead back to social interactional theories like Mead's rather than to cognitive ones like Piaget's.

This brief discussion of Mead's view of the interaction of the individual with the social environment may seem somewhat incompatible with the understanding of scripts that has been outlined so far in this paper. The discussion so far might have suggested that the notion of scripts implies that a person needs simply to follow the script/act out a part in it. In Mead's view, on the other hand, the individual is engaged in a reflexive process in which the self is fed from, as well as feeds into, the individual's social interactions. Thus, in Mead's view of social interaction, the individual does not simply follow a pattern or script specific to an event or situation, but is also engaged in constructing the situation, the meanings within it and one's self.

This point is one that Winegar (1989) recognises and suggests must be borne in mind if one is interested in studying children's *understanding* of social events rather than their memory/knowledge of them. Winegar argues that studies that have looked at children's knowledge of social events have typically used methods which have required children to recall events and recount them. The descriptions children have provided of those events can indeed be analysed in terms of script components (see for instance Nelson & Gruendel, 1981; Collins, 1983) and have thus been characterised as flowing from "generalised event representations". Yet, as Winegar (1989) notes, children's recounting of events should more properly be regarded as a verbal expression of their memory of events rather than an indication of their understanding of them. He cites studies which have shown that there are important differences in how children report what happens in an event depending upon how the question is asked, who asks the question and the mode of child response. He further says that evidence is increasing that there is very little that is predictable in the relationship between what children say happens in an event and what children do in that event (Damon, 1977; Kassin & Ellis, 1989, cited in Winegar, 1989, p. 47). This leads him to note the importance of considering children's knowledge of events as context-relative; children's descriptions of events are not a simple expression of what resides in the child's head about the event - they are "active negotiations between a child and his or her social environment" (p. 47) and this includes who asks the questions and how they are asked.

The implication of these ideas for the study of children's social understandings are numerous. The acknowledgement that, as Mead has long held, meanings are socially constructed, implies that we have to treat "understandings" as similarly socially constructed. In turn, this implies that if we are to study children's understanding of events they meet, then we must do this while children are actually involved in the events. While children sometimes encounter events vicariously, such as through listening to a story or watching a televised incident, more usually, children learn about events through what Katherine Nelson (1981) terms "participatory interaction":

> Although this is not the only type of learning that leads to script knowledge, it is clearly a very important type. Although adults direct the action and set the goals, they do not necessarily provide direct tuition for the child; rather they provide conditions under which the child fills in the expected role activity. (p. 106)

Winegar (1989) argues that "participatory interaction" as a type of learning is not restricted to the acquisition of knowledge about events but is a common method for the acquisition of cultural knowledge. Children, he says, learn from interaction with more expert others, usually adults but often peers, who may at times offer explicit instructions and explanations but more usually provide only the minimal information to enable the 'novice' to find her or his way.

The intellectual roots of this reasoning are clearly in the sociogenetic theory of development associated with Lev Vygotsky who in turn has much in common with George Herbert Mead's interactionist perspective on development (see Valsiner & Van der Veer, 19__ outlined above. Winegar's argument also suggests that although in script theory the expectation is that children will "learn a part", the lack of direct tuition and the fact that the 'novice' or child is allowed to find its own way, indicate that this perspective is still a useful one for investigating children's understanding of social events - provided the method used in the investigation is one that

i) allows for children's participation in events to be observed directly and
ii) recognises that understanding, and its expression, is constructed and given meaning within social interaction.

Among other things, this last point means that the nature of the social interaction of the study itself and its influence on the expression of children's understanding must also be considered:

> Children are meaning-makers. Just as they try to make sense and construct order out of kindergarten daily routines, trips to museums, and trips to the store, they similarly try to make sense out of investigative interviews. (Winegar, 1989, pp. 44-48)

The "meaning-making" characteristic of children is what also makes them constructors of understanding within interactional situations. Winegar (1989) uses the terms "differential constraining" and "progressive empowerment" to describe the complementary behaviour that goes on in social interactions between the 'expert' other and the 'novice'. Until the novice gains expertise in performance, the 'expert' other tends to adjust the level and form of support he or she provides to 'empower' the novice to perform in a progressively more socially acceptable manner. The expert's actions are termed 'differential constraining' because they are continually readjusted as the novice's performance improves. With more experience, novices internalise the environmental supports and constraints originally provided by experts and eventually become self-constraining. Winegar notes, however, that the internalisation of constraints should not be seen as suggesting a passive replication of the rules of social exchanges in children's understanding of social events. Work done by Wozniak (1986, cited in Winegar, 1989, p. 50) shows that children construct their understanding of an event using both information from their environment and understanding from previous experience.

In this sense then, children's understanding of an event is not a direct copy of experiences of instances of an event. Rather, their understanding is a construction from experience and environmental information. Moreover, children take an active part in creating the 'environmental information': by using language and action to participate in events, children contribute to the construction of meaning that, as Mead has argued, is inherently part of every social encounter.

In the next section two studies in which Winegar used this perspective will be outlined by way of examples.

Winegar's view is very closely related to a theoretical framework that Jaan Valsiner (1985, 1987; Valsiner & Hill, 1989) devised in the mid-1980s and has been fruitfully using to study children's socialisation into culturally acceptable ways of acting in given situations. The framework, like Winegar's view, is strongly based in the tradition of Vygotsky's thinking but draws also from the field theory methods of Kurt Lewin (1939). In Valsiner's framework, children's development of acting and of thinking is explained through the mutually related functioning of three zones. The first zone is called the "zone of freedom of movement"(ZFM), a concept borrowed from Lewin's field theory. The ZFM refers to the structure of the environment that is functionally available to the developing child at a given time. The limits of this zone are negotiated with the caregivers and change as the child develops or moves into an area with a different physical structure. For example, the ZFM of a child may be the playpen in the lounge, or the front yard.

The zone of promoted action (ZPA) comprises the set of objects and actions that the child's social environment actively promotes to the child to use and perform. The ZPA may be observed in the parents' and other people's preference structure of the child's different actions. As the child develops, he or she internalises the social expectancies communicated through the promoted actions and thus gains knowledge about the acceptable and expected way of acting in a given situation. Once gained, this knowledge may be used in any way by the child. Valsiner & Hill (1989, p. 165) give the example of an adolescent who in a social situation knows the rules of courtesy well but decides to not act appropriately and instead "cuts" another. Valsiner (1985) calls the ZPA an important "selective canalizer of the child's actions" but also says that the structure of the ZPA can undergo dynamic transformation because it is negotiated in adult-child interaction. (The parallel with the notion of Mead and Winegar that the meanings of events are negotiated in interaction is clear here.)

The zone of proximal development (ZPD) is a well-known Vygotskian term and refers to the subset of ZPA actions that could be actualised with the help of other people. The difficulty with this zone is that often one cannot know which actions actually constitute the ZPD since the existing structure of the ZFM and ZPA may restrict the opportunities of testing the limits of the ZPD. For instance, if the act of holding a fork is not within the ZPA or ZFM of a 16-month-old, it may not be possible to see if the 16-month-old child is physically capable of holding the fork (Valsiner, 1985). Thus the ZPD-ZPA relationship is seen to determine what the child can cover next and what she cannot.

The theoretical framework developed by Valsiner (1985) is in line with the methodology, newly articulated by Valsiner (1989) but devised by Vygotsky, which attempts to understand the dynamic nature of developmental processes without disturbing them. He emphasises the active role of the child in reorganising any context he or she is in. Vygotsky calls his method the method of "double stimulation". In this method, the researcher sets up a structured stimulus field and within it inputs a complex stimulus situation. The subject is then put into the stimulus field thereby varying the stimulus field structure. The subject has freedom to act in any way on any part of the stimulus field. She/he can replace the researcher's goal with a personal one or even create an instrument to achieve the task set by the researcher.

Valsiner notes that the method allows the subject to be creative and innovative because the subject comes to the situation already equipped with semiotic capabilities that may be used to organise itself and the task, or even to go beyond the task. The method, therefore, eliminates the idea that the subject can be controlled; it brings back the notion of free will and allows behaviour to be observed in its natural state.

Valsiner has used these notions in conjunction with his theoretical framework in a number of studies. I shall refer to one of these by way of example in the following section.

### Examples of Studies which have used Notions from Script Theory and from a Vygotskian Perspective to Explain Children's Understanding of Social Events

***Example 1: "Scripts" and "Generalised Event Representations" (Nelson & Gruendel, 1981).*** In Nelson's first study using a script theory framework (Nelson, 1978 cited in Nelson & Gruendel, 1981, p. 135), 20 preschoolers were asked to recount what happened during a number of events such as "during lunch at the day-care centre" or "at McDonald's". General probes were used such as "anything else?" and later more specific questions such as "what happens next?" or "how do you know when it's lunchtime?" Some examples of the children's responses are reproduced below.

Table 4.1
Examples of Cookie and Birthday-Party Scripts from 3-8 Years

*Making Cookies*

Well, you bake them and eat them. (3;1)

My mommy puts chocolate chips inside the cookies. Then ya put 'em in the oven . . . Then we take them out, put them on the table and eat them. (4;5)

Add three cups of butter . . . add three lumps of butter . . . two cups of sugar, one cup of flour. Mix it up . . . knead it. Get it in a pan, put it in the oven. Bake it . . . set it up to 30. Take it out and it'll be cookies. (6;9)

First, you need a bowl, a bowl, and you need about two eggs and chocolate chips and an egg-beater! And then you gotta crack the egg open and put it in a bowl and ya gotta get the chips and mix it together. And put it in a stove for about 5 or 10 minutes, and then you have cookies. Than ya eat them! (8;8)

*Birthday Party*

You cook a cake and eat it. (3;1)

Well, you get a cake and some ice cream and then some birthday (?) and then you get some clowns and then you get some paper hats, the animal hats and then and then you sing "Happy Birthday to you", and then then then they give you some presents and then you play with them and then that's the end and then they go home and they do what they wanta. (4;9)

First, uhm . . . you're getting ready for the kids to come, like puttin' balloons up and putting out party plates and making cake. And then all the people come you've asked. Give you presents and then you have lunch or whatever you have. Then . . . uhm . . . then you open your presents. Or you can open your presents anytime. Uhm . . . you could . . . after you open the presents, then it's probably time to go home. If you're like at Foote Park or something, then it's time to go home and you have to drive all the people home. Then you go home too. (6;7)

Well, first you open your mail box and you get some mail. And then you see that there's an invitation for you. Read the invitation. Then you ask your parents if you can go. Then you . . . uhm . . . go to the birthday party and you get a ride there, and after you get there you usually wait for everyone else to come. Then usually they always want to open one of the presents. Sometimes then they have three games, then they have the birthday cake, then sometimes they open up the other presents or they could open them up all at once. After that they like to play some more games and then maybe your parents come to pick you up. And then you go home. (8;10)

These types of responses raised a number of questions in terms of the structure of the task given and how the responses could be interpreted. It was unclear whether a verbal recount would accurately reflect the underlying representation of the event. Furthermore it was necessary to decide what to look for as characteristics of scripts. In the end it was agreed that since scripts represent events that occur over time and in a causal relationship, temporal and causal structure was a characteristic - even though in some scripts temporal sequence and causality were more problematic (e.g.: there is very little causal structure in a birthday party script - many actions, such as singing "Happy Birthday" or opening presents, can happen in more than one order). In analysing children's responses, it appeared that children did link together acts that were in causal or enabling relations more than sequences that were simply temporally linked.

Another finding from Nelson's studies was that children reported events in a general form that provided a frame and specified slots to be filled but did not necessarily specify what would or could fill those slots on a given occasion. For instance children used the general pronoun 'you' as well as the tenseless verb - e.g. "you eat" or "you throw away plates". Also, in a further study by Nelson and McCartney (1981, cited in Nelson & Guendel, 1981, p. 146), during which 5 to 7-year-olds were asked to retell a story after a short delay, children seemed to recall the main acts, particularly those identified as such, much more than the details of a story. The older children also remembered more details about the script than younger children. This tends to support both the notion that generality of scripts is a salient characteristic as well as the idea that with age, children's scripts become more complex and capable of specificity rather than becoming more general.

Nelson and Gruendel (1981) cite a number of other studies they carried out in order to answer questions like "how do scripts develop?", "what is the role of scripts in memory?" as well as whether generalised event representations could be seen as the basic building blocks of cognitive organisation. Their relevant conclusions for the purposes of our discussion are:

i) What gets represented from experience in a script is only a partial copy of that experience. It provides a context for a child to act and think in that and similar situations. Different people's representations of the same event will vary depending on previously established schemas.

ii) Scripts are outcomes of the analysis of representations of experience. They incorporate notions of who, what, where, when, why and how in sequentially structured relationships. These notions are the categories children use in understanding events.

***Example 2: "Differential Constraining" and "Progressive Empowerment" (Winegar, 1989).*** Winegar (1989) reports two studies he conducted in which children's participation in social events and their understanding of them are investigated through focussing on the role that the more expert others play in facilitating participation and understanding.

In the first study he used an experimental repeated-measures design in which he controlled the adults' actions and noted the actions of the child during a series of visits to a store to purchase a toy. Through videotaping the transactions and coding children's actions, Winegar was able to show that children did indeed use adults for cues on their performance but, with repeated experiences of the event, this use declined. Winegar therefore concludes that the study provided preliminary support and illustration of the processes of "participatory interaction" suggested by Nelson (1981) and the processes of "differential constraining", and "progressive empowerment" which he sees as the medium through which children's understanding of social events emerges.

However, he was concerned that by controlling the adults' actions and focussing on the child's he had created an artificial situation which did not reflect the interdependence of social interaction. Methodologically it was also very difficult for the storekeeper to keep her actions within the limits of the experimental script and yet readjust them to the child's actions.

In the second study Winegar (1989) therefore used a totally naturalistic design in which eighteen children in a preschool setting were observed interacting as a group during snack-time over a one-year period. Three teachers were observed and videotaped with the children. All teacher and child actions and statements were coded in order to enable relations between teacher actions and child actions to be assessed. The results indicated that the number of teacher-initiated actions declined over the first three weeks of school while the number of child-initiated actions increased over the same time period. Furthermore, the number of teacher directive statements declined over time while non-directive statements increased, particularly between the third and the eleventh day of school. Winegar suggests that these findings show that the process of 'differential constraining' and 'progressive empowerment' as well as 'participatory interaction' were taking their course.

He further concludes that the study illustrates both the "intraindividual" and the "interindividual" co-constructive nature of children's understanding of social events. He notes that children came to snack-time with previous experiences of meals and eating so that the teachers' actions did not need to be geared to instructing children on how to eat or drink. Instead, adults' activities were geared towards leading children to a set of actions that were preferred in that particular environment. The teachers' goals and actions were not always accepted by the children. Winegar (1989, p. 63) argues that this is an indication that the children's understanding of the snack-time situation was an "intraindividual" co-construction based on the children's understanding of meal-times from previous experiences and from information gained from the actual environment of snack-time at school. The "interindividual" co-constructive nature of children's understanding of the snack-time event was illustrated in children's negotiations of their actions and goals (through their language and behaviour) with other participants in the event. Winegar concludes, therefore, that children's understanding of social events is a process of co-construction both within and *between* individuals.

***Example 3: Social behaviour as "promoted action" within the "zone of freedom of movement" (Hill & Valsiner, 1989).*** Hill and Valsiner (1989) used Valsiner's theoretical framework of three mutually-dependent zones to study the socialisation of eighteen North American toddlers to wave "bye-bye" to departing visitors. Hill and Valsiner explain how the structure or script of the event of waving goodbye fits within the theoretical framework devised by Valsiner (1985). Waving bye-bye is within the ZPD of most toddlers aged 1-2 years and learning to wave good-bye involves narrowing of the ZFM of the child by its caregiver who might pick up the child and take it closer to the departing visitor. The efforts of the caregiver, and often the departing visitor's as well, to make the child wave goodbye, would constitute actions within the ZPA.

Hill and Valsiner observed children in their families and videotaped their behaviour between the arrival of the first experimenter who took in the camera, was greeted briefly, and proceeded to set up the camera and start recording. Then a stranger arrived who was the visitor. Introductions were made and the visitor remained open to child contact; if the child did not initiate contact, the stranger did. After some time (6-20 mins) the visitor would declare the intention to leave so that the departure ritual was set off. Videotaping continued for 5 to 10 minutes after the visitor's departure.

Having compiled and analysed a total of 48 departure episodes, Hill and Valsiner concluded that adults do structure settings in line with their socialisation goals. Adults were observed to selectively exclude some action opportunities from the ZFM of the child, such as when they moved the child closer to the departing visitor. Also, adults specified the expected ways for the child to act (the ZPA) by practically bombarding the child with demands for bye-bye waves. Through these processes most children were led or moved into waving bye-bye (i.e. an action from their ZPD was actualised) though four children in the study were not observed displaying 'bye-bye' in any form during the study. However, even in these cases, the adults did engage in "social canalisation", as Valsiner calls it. Sometimes children were observed to act in ways that did not produce a wave but still indicated understanding that the visitor was about to leave. For instance, one child toddled over to the front door when asked to wave bye-bye. At other times, the mother would either assist the child to wave its hand, or provide a simplified vocal model for saying bye-bye, indicating that the child is still considered incapable of performing these actions independently.

Finally, Hill and Valsiner comment that the event they analysed was highly culture-specific in its form; in some cultures for instance, children might not be considered serious interaction partners so that there might not be a great deal of effort expended in getting young children to say goodbye. However, their example is a good illustration of how "children (within one culture) construct their understanding of polite conduct in the course of childhood years, using adult models in innovative ways, in conjunction with their personal experience" (p. 163). As such, it provides empirical support for the theoretical explanation Valsiner offers for how understanding of social events develops.

## The Proposed Study

The proposed study started out as a wish to investigate the meaning behind the oft-repeated phrase that "parents and early childhood staff play complementary roles in children's lives". Questions I have include:

i) how do children understand the contributions in their life of the parent and the early childhood teacher?
ii) Does each adult contribute different things or do the contributions overlap?
iii) Where are the areas of overlap or divergence?
iv) If there are divergences, are they complementary in some way or are they simply differences?

v) Where, if at all, do divergences arise from?
vi) Can knowledge in this area help early childhood teachers in their practice?

At the background of these questions there is of course the notion that the ideal form of non-parental early childhood education should work in partnership with parental care of children. This assumption has been responsible for many an early childhood project to date. For instance, discussions on the effects of centre care on children's social development are often based around measures of children's attachment to their primary caregiver with any weakening in a child's attachment to its primary caregiver often being viewed with dismay (e.g.: Belsky, J., 1986). The assumption of this view clearly is that centre-based care should support the parents' goals of secure attachment to the parents.

A similar rationale underlies the comparison of the language used by children in early childhood education services to the language children use at home. Such studies often include discussions of cognitive gains children appear to be making in each setting (e.g.: Tizard & Hughes, 1984) and of ways in which the structure of adult-child conversation varies from one setting to the other. For instance, Wells (1978) notes that in the Bristol project in which samples were taken of the spontaneous use of language by preschool children at home and in the infant school school talk was marked by a high proportion of teacher utterances that were questions while in 'home talk' one of the chief characteristics of effective conversation is a reciprocity in the shared construction of meaning" (p. 27). In other words, while questions did occur at home, their frequency was not so high as in the infant school, their use was distributed more equally between adult and child and they occurred because the asker was seeking information which she believed the other could supply. Many teacher-initiated questions showed little evidence of this reciprocity. Clearly, one of the themes that run through studies such as these is the contribution that adults in the two contexts of the home and the school/preschool make to the quality of interaction that goes on in the two contexts, with the implied ideal being that they should either be as good as each other or at least complementary to each other.

Another theme underlying research of this kind is the concern with how language contributes to the structuring of children's experience of the world and their understanding of events around them. Wells (1978) says:

> Everything that happens in a child's daily life is a potential subject for the sort of talk that facilitates attention, interpretation and evaluation, but parents differ in the use they make of these opportunities. In some homes, events are taken very much for granted, each one receiving the same sort of passing comment, whereas in other homes there is a much greater selectivity, some events being discussed in considerable detail and connections made with the wider context in which they occur. As a result of such different experiences, the internal models of the world that children are constructing take on their particular shapes and textures and come to be more fully developed in some areas than others. (p. 19)

I found this theme an intriguing one since it connects with both the sociological literature that tries to explain the sources of inequality among individuals (e.g.: Bernstein's view of the development of elaborated and restricted language codes which dispose speakers to orient themselves differently towards power and roles in society) and the developmental literature which looks at interaction among individuals as the basis for development (e.g.: Vygotsky, 1978; Wertsch, 1985; Valsiner, 1989, Winegar, 1989). The attraction of these two connections was that it became possible to see that what children understood about the adults in their lives could be studied not only in terms of psychological processes but also in terms of how cultural and social factors might mediate those processes.

The principles of script theory, the notions of 'differential constraining' and 'progressive empowerment' in the context of 'participatory interaction' and Valsiner's three-zone framework suggested a way that this objective might be reached.

**Methodology**

Two phases to the project are envisaged. Phase 1 is now completed. Phase 2 is described below as it was originally planned. Now that Phase 2 has been completed, the writer however is reconsidering her approach at Phase 2.

***Phase 1.*** Staff in 4 early childhood centres in Wellington were asked to participate in a group interview during which the researcher tried to identify which events staff thought might be useful contexts for observing the contribution of staff and parents to children's understanding of those events (see Appendix 1: Framework for group interview with staff in early childhood centres).

***Phase 2.*** Events were then to be chosen that could be observed occurring naturalistically using Vygotsky's method of double stimulation articulated by Valsiner (1989). For this phase at least two events were thought necessary. The subjects would be 20 preschoolers from a total of 5 early childhood centres with a socially-mixed intake of children. Permission to conduct the study would be sought via an initial visit to the centres during which the researcher would ask centre managements for direction on how they would prefer her to proceed - by letter to parents or verbal communication or a group basis or one-to-one. Staff's participation would be sought in a similar manner.

The total sample would consist of 20 parent-child pairs and 20 staff-child pairs. Total participants would be 20 parents, 20 children and a maximum of 20 early childhood teachers; the number of early childhood teachers could be less if a teacher participated in a child-staff pair with more than one child.

Each child would be observed interacting once with the parent and once with the early childhood teacher during each of the two events.

The interactions of child-parent and child-teacher would be videotaped and analysed by the researcher in terms of their underlying script and an analysis attempted of how children's actions were being "canalised" by the adults.

The researcher's construction of the adults' behaviour would then be shared back with the adults (teachers' scripts with teachers' and parents' scripts with parents). Their reaction to the researcher's interpretation would then be sought. This would allow both parents and staff the chance to think about the underlying expectations and cultural knowledge behind their individual interactions with children. It was expected that this would reveal the goals or objectives each adult would have operated with during the two events.

Further analysis of this feedback will be undertaken to determine whether complementarity exists in the goals that adults have for children as well as in the methods they use to achieve them.

A further analysis would be done of children's actions during the events and an attempt made to present the researcher's construction of the child's understanding of the given events.

**Progress Report**

Phase 1 has now been completed. Extensive notes were taken during the group interviews and events mentioned were grouped as follows:

| | | Number of Centres which named the events |
|---|---|---|
| A. | Events using general social skills | |
| | leave-taking from parents and staff | 3 |
| | greeting visitors | 1 |
| B. | Events requiring knowledge about how to behave in groups | |
| | reading stories in a group | 3 |
| | mealtimes | 4 |
| | sharing toys/objects | 2 |
| C. | Housekeeping events | |
| | toileting routines | 4 |
| | handwashing routines | 4 |
| | sleep-time routines | 3 |
| | helping to tidy up | 3 |

D. Events enabling one-to-one interaction

| | |
|---|---|
| getting organised for sleeptime | 3 |
| when a child is ill | 2 |
| times at beginning or end of day | 2 |
| nappy changing | 2 |
| dealing with behaviour problems | 3 |
| learning a new skill, e.g. using scissors, using puzzles, writing letters | 3 |
| putting on items of clothing | 2 |
| when a child is upset | 1 |
| encouraging eating | |
| going out for walks | |
| reading a book alone with adult | |
| helping adult in the kitchen | |

E. Other events mentioned in only one centre

learning appropriate behaviour around different activities, e.g. dough play, sandpit, plastic bars, swings, painting, water play, carpentry
transferring child from highchair to small chair
road crossing when out as a group
behaviour at the library
visiting the dental nurse
behaviour during evacuation drills
going shopping

The four group interviews were all held in childcare centres either after hours or, in one instance, as part of the activities during a programme-planning day. The staff in all centres seemed very interested in what my investigation could show. Over and above the discussion on events, two points came through very clearly during the discussions.

The first relates to the difficulty that staff in all four centres said they encountered in spending time in one-to-one interaction with children. In all four centres staff emphasised that the group situation put definite limits on how much time staff could spend with individual children. Indeed, as the events mentioned in category D above indicate, most opportunities for one-to-one interaction seemed to occur either during compulsory care activities such as in nappy-changing, or in getting children ready for sleep-time, or during 'crisis' situations such as when a child is ill or needs disciplinary attention or when, for some reason, the demands of the group have lessened - as when a small group goes out of the centre for a walk.

The other major point that deserves mention is that the staff of two of the four centres emphasised greatly the importance of the settling-in period and how this should be preceded by a period during which children visit with a parent so that both the child and the parent would learn to feel comfortable in the centre. The staff in these centres suggested that the settling-in period might be a good one to study as a context in which the contribution of staff and parents to children's understanding of the early childhood centre experience might be observed.

## Discussion and the Way Forward

The intention of the Phase 1 interviews was to identify events that might provide a useful context for exploring the contribution parents and early childhood teachers make to children's understanding of events around them. In the interviews with teachers, I was particularly interested in events that children might meet for the first time in the early childhood group setting. The idea behind this was that if events were new ones, then in observing child-parent and child-staff pairs within these events, one could expect that the parent and the early childhood teacher would each have the same background of experience in that event with the child. I was also interested in events which could occur naturally, or be set up in a naturalistic way, in either the home or the centre situation.

The events identified by the staff certainly suggest a number of possible events that would fit the requirements. For instance, any of the following events would be worth following through:

leave-taking from parents and staff
greeting visitors
helping to tidy up
learning a given new skill
putting on an item of clothing
helping adult in the kitchen.

However, as the interviews with staff were proceeding, I became increasingly impressed by how salient the characteristic of being in a group situation seemed for staff. During numerous points in the interview, one or another member of staff would comment on how "being in a group" was possibly the most important thing the child had to get used to when it first joined the centre. In the two centres where settling-in procedures were extensively discussed, this point was even more strongly made. In one centre particularly, the staff had a lot to say about the importance of both parents' attitude to using childcare for how well-settled a child was, and for how the child came to view his or her experience in the centre.

These strong views have therefore caused me to reflect once more on the best way forward into Phase 2.

Part of the rationale for this study is that it should produce knowledge that will be of use in the practice of early childhood education. The views staff expressed in the group interviews have suggested to me that the best event to study would be the event of settling-in in the centre.

Before this project can proceed, the researcher needs to decide whether to redesign Phase 2 of the project in a way that would meet this alternative objective.

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## Appendix 1

### Framework for group interview with staff in early childhood centres

**Identifying routine events that early childhood teachers see as important when children first start attending a childcare centre.**

Introduction:

Hello, my name is Carmen Dalli; I lecture in Education at Victoria and am currently doing a PhD in ECE.

My topic is: Parents and early childhood teachers: complementary roles in children's lives.

In my PhD I will be arguing that both parents and EC teachers make very important contributions to how children understand the world - i.e. in each interaction of child and adult, the adult is helping the child make sense of the world.

Today's meeting is to help me identify **routine activities** that might be new to a child when they first arrive in a centre. I'm thinking of routine activities that you as early childhood teachers engage in with children, especially when they **first come to the centre**. If you like it's an attempt to pick your brains about what you feel are the most important of those activities, since you are the people who deal with these children and therefore know best what experience has taught you to focus on.

I've got a few questions I'd like to ask you about this. I should also say that I'll eventually write up what you tell me as part of the analysis of my thesis; I will also write a short separate commentary on it. When I have done the commentary, I'll send a copy to the centre and acknowledge your help in it.

Questions:

1. What's the broad structure of the programme for a child in your centre?
2. Are there routine activities that you think will be new to a child coming from home to a group situation?
3. Do you see some of these as more crucial than others?
4. Why do you see some activities as more important than others?
5. Are there some activities where the child who has just joined the centre has more opportunity to interact with you more extensively on a one-to-one basis?

# A STUDY OF CAREER INTENTIONS:
# 1990 INTAKE DIPLOMA OF TEACHING (EARLY CHILDHOOD) STUDENTS

Jan Harding

**Acknowledgement:** I would like to thank Margery Renwick for the time and input she has put into assisting me with this project. After discussing the project with Margery she kindly gave permission for some of the questions from her survey (1989) to be incorporated in my study. I would also like to thank the staff and students of Palmerston North College of Education for their time and energy in supplying me with the information contained herein.

## 1. INTRODUCTION:

The investigation I carried out concerns the career intentions of the group of students currently enrolled in the first year of the Diploma of Teaching (Early Childhood) at Palmerston North College of Education. Originally I had wished to pursue this study with students at Palmerston North and Dunedin enrolled in their third and final year of this course. I found, however, that Margery Renwick (1988) of the New Zealand Council for Educational Research was currently following the first intake of students as they commenced their training at each College throughout New Zealand. Renwick's research project is a comprehensive, longitudinal study designed to evaluate the effect of the new three year integrated course of study in early childhood. My investigation, therefore, was adapted to investigate the attitudes of the third intake of students at Palmerston North and compare them with the preliminary results that Renwick has produced.

My interest in this topic has been aroused by the students I come into contact with through my position as an Associate Teacher for Palmerston North College of Education and my involvement in the local childcare scene in Palmerston North.

## 2. BACKGROUND:

### 2.1 Previous Research

On reading Renwick's Interim Report (1989) where she presents her initial findings, I found confirmed what I had suspected - that is, out of 70 students surveyed, 40 wished to work in kindergartens and only 7 in childcare. Of the remaining 23 students, 2 wished to teach in junior schools and 21 were still undecided. Even allowing for a large proportion of the undecided students ultimately opting for a career in childcare there is no way that students entering the childcare field will come near the 50% mark of graduates. This is not a very promising outlook for childcare, especially when we look at the figures Sylvia Allan (1989) produced in her report on "Qualifications and Training" conducted with early childhood workers. Of 1957 respondents from licensed childcare centres, 603 (31%) had no formal early childhood qualifications. Kindergartens on the other hand produced 1305 respondents with only 70 (5%) who had no formal early childhood qualification. Of the three major early childhood services in New Zealand Playcentre fared the worst - of 2321 respondents a staggering 1358 (59%) had no formal early childhood qualification. However, one must acknowledge the uniqueness of the Playcentre movement and remember that a large number of these people could possibly be in process of achieving a Playcentre qualification.

### 2.2 Preferred Work Destination

It is of concern, however, to note that although a large proportion of prospective graduates may wish to enter the Kindergarten service there may not be the positions available for them to fulfill this desire. Casual observation of the kindergarten vacancies advertised in "The New Zealand Education Gazette" in the latter months of 1989 did not reveal a too healthy employment prospect. One "Gazette" (1989) recorded 22 teacher and 7 head teacher vacancies. Allowing for a conservative estimate of 20 graduates from each of the four Colleges who would have been graduating students, plus qualified teachers returning to service after a break, this does not augur well for the most recently qualified.

One could assume that if there was a shortage of positions in kindergartens that graduates would be driven into childcare positions as an alternative. Even if this view holds true, I believe that childcare will still suffer as graduates will enter these positions with the idea that it is only a short-term prospect until a kindergarten position becomes available. This would leave childcare still in the unenviable position of high staff turnover. I also believe that this view will suffer on closer examination because of the issue concerning pay for childcare workers. Although pay and conditions have improved greatly over recent years, childcare employees still lag behind their kindergarten counterparts in rates of pay (see Fig. 1).

Fig. 1

### PAY RATES FOR KINDERGARTEN AND CHILDCARE EMPLOYEES

| | |
|---|---|
| Kindergarten | |
| P1 scale | $20,463 |
| Childcare | |
| Trained worker scale | $18,720* |

*Childcare pay rates are quoted as hourly rates.
This figure has been arrived at by equaling $9.60
per hour to a 37.5 hour work week.

This factor alone could well influence early childhood graduates to ignore childcare positions in favour of other employment - especially when one remembers the fee burden tertiary students now carry. A percentage of graduates will leave college with loans needing to be repaid, so employment which enables them to meet this financial obligation will be to the forefront in decision-making.

### 2.3 Funding and Training

Crispin Gardiner (1989) has made a plea for more trained staff in the childcare field. He made the observation that "trained staff have become hard to get" when referring to the obsolete method of funding for early childhood centres. The old funding system paid centres a subsidy for every trained staff member. Even with this money available centres found it difficult to find qualified staff. One would hope that the new method of funding (which funds the child and not the staff) would allow for better pay and conditions for all early childhood workers in childcare (particularly those with recognised qualifications), but unfortunately this still has not been achieved. As mentioned above, pay and conditions for childcare "workers" still fall considerably behind those of kindergarten "teachers". Until the status and qualifications of personnel employed in childcare centres are accepted as being equal to those in the kindergarten service, I believe that there will always be an insufficiency of "quality" people choosing childcare as their career option.

### 2.4 Unionism

The issue of equality between services has been fought for, until recently, by the Early Childhood Worker's Union (ECWU) which covered employees in childcare centres. However, the Union had to conduct their fight for better pay and conditions each year with four separate groups of employers. One group, called the Consenting Parties award, covers workers from centres where employers agreed to award coverage from the inception of the Union when unionism was not compulsory. This group of workers enjoys the most favourable award conditions. Another group covers workers in the south of the South Island where they felt special conditions applied - however their award coverage is approaching Consenting Parties benefits. A third group covers workers employed at University run childcare centres. The last group covers those under a National award and applies to all workers whose employers were not party to the previous three awards. These employers are reluctant to agree to the large increases in pay and conditions which would bring their employees up to the level of the previous three awards, let alone consider equality with kindergarten teachers. This state of affairs has very recently been reinforced with the announcement in late October 1990 (Dominion Sunday Times, 1990) that the National Award for early childhood workers has been settled. These workers will have their pay rates increased 17% for untrained, 24% for trained and 27% for supervisors. When one considers that these worker's pay rates were lower than the other three Awards and that Consenting Parties and Otago/Southland awards granted workers increases between 29% - 38%, it is clear that the National award worker's remuneration benefits are falling even further behind. This attitude leads one to believe that this group would prefer to employ fewer trained people so that the wages component of running a childcare centre could be kept low so as to allow expenditure elsewhere. I leave the destination of where that money would go open to conjecture. In recent

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months however ECWU and KTA (Kindergarten Teachers Association) have merged to form one Union CECUA (Combined Early Childhood Union of Aotearoa). What this will mean for early childhood workers remains to be seen as both former unions have awards in place until mid-1991.

### 2.5 Burn-Out

2.5.1 Passmore (1988) studied childcare workers and burn-out. She queried the relationship between high turnover of staff and burn-out (a term used to describe the worker's physical/mental condition when a job becomes too much). Passmore's subjects were all trained childcare workers who had completed a one year course at either Auckland Teacher's College or Wellington Polytechnic. The answers to her question as to why they had left childcare work revolved around lack of money (i.e. poor pay) - one subject earned more on the Domestic Purposes Benefit - and poor conditions. The "babysitting" image was also prevalent as a reason for moving on. Subjects felt that the value of the work carried out in childcare centres was very undervalued.

2.5.2 Growden (1989) also found that similar reasons applied to the subjects of her study involving childcare workers' attitudes to their work and workplace.

2.5.3 Renwick's study also reflected this when she reports that "by far the most common reason [for not wanting to work in childcare] was the poor pay and working conditions including long hours and short holidays".

### 2.6 General

As stated previously, Renwick's results have confirmed what I had thought to be the attitude of students - i.e. that a career in the kindergarten service is more desirable than one in the childcare service. At the outset of this investigation I hoped to provide evidence that attitudes towards childcare were improving - in comparison to Renwick's results. For many years a stigma has been attached to the use of formal childcare arrangements. This, no doubt, arose because of Bowlby's theory of maternal deprivation (McDonald 1977). McDonald, however argues that this theory has acted more as a myth to keep women in the home (i.e. out of the workplace) rather than for the benefit of the child. In recent years though the need for more places in full-time childcare has become apparent and society is moving towards an acceptance of this trend. We therefore need to ensure that the training systems in place are producing sufficient graduates to meet the needs of the various early childhood services. This means that the courses offered must ensure equality of recognition for all early childhood services for whom they are providing training. By conducting this piece of research at this time I am hoping to show that this is indeed happening by comparing my results directly with Renwick's (1989). If the results still show the discrepancy which Renwick produced then I feel that some adjustments will need to be made by all concerned - not only childcare and kindergarten personnel and training providers, but by educating the public generally as to the benefits available to their children and themselves if they use childcare facilities on whatever basis they require.

## 3 RESEARCH QUESTION:

The question I chose to research, therefore, is:

> What are the career intentions of students currently enrolled in the first year (1990) of the Diploma in Teaching (Early Childhood) at Palmerston North?

## 4 METHOD:

The method selected to gain the information required for this investigation was a questionnaire (see Appendix). This questionnaire was drawn up and all questions were designed so as not to reflect a bias towards any particular early childhood service. Of necessity, though, where alternatives were offered, kindergarten and childcare were the named services and where necessary a box was available as an alternative to these two choices.

It was intended to survey all 1990 first year students in Early Childhood at Palmerston North College of Education. This represented a sample of 65 students. This number also included 9 students who are participating in a shortened course (i.e. 1 or 2 years of study as opposed to a full 3 year course). This group of 9 students may actually be studying at a more advanced level than the main body of first year students, but by the very fact that this is their first year of study at Palmerston North College of Education they have been included in this survey.

It was proposed that the cooperation of College staff would be desirable so that the students could be surveyed at a pre-determined time. This cooperation was willingly given and with the exception of shortened course students - all other questionnaires were completed on the same day.

A small pilot study was carried out - using a group of early childhood colleagues as the respondents. This was done to ensure the clarity of the questionnaire, and also to gain an approximate time length for College staff.

Margery Renwick was also consulted in the early stages of planning this project and she supplied copies of her questionnaire and results. This was helpful in preparing my questionnaire and for the results she had obtained for comparison with the data collected through this investigation.

## 5 RESULTS

### 5.1 Number of Respondents

Of the roll of 65 first year students enrolled in the Early Childhood course at Palmerston North College of Education 46 replies (71%) were received. Of these, 3 replies were from a group of 9 students enrolled in a shortened course of study, and although they were studying at 2nd and 3rd year level they are in their first year at Palmerston North College of Education. They are therefore, technically considered as first year students. 8 students were absent from College at the time of the survey. Replies were not received from 11 students (5 first year full course and 6 first year shortened course). It is presumed that they declined to take part in this study.

### 5.2 Gender, Age, Ethnicity

Of the 46 replies - 44 (96%) were female and 2 (4%) were male. 28 (61%) students were in the 17-20 year age group, 5 (11%) in 21-25 year age group, 2 (4%) in 26-29 year age group and 11 (24%) in the 30+ year age group (see Fig. 2).

34 (74%) described their ethnic origin as Pakeha/non-Maori New Zealander and 4 (9%) described themselves as Maori. The remaining group of students contained 1 Samoan, 1 Pacific Islander, 1 Asian, 3 Maori/Pakeha and 1 described themself as Bicultural and Pakeha. 1 student did not identify her ethnic origin.

### 5.3 Language

The question relating to language resulted in 44 (96%) identifying English as their first language; 1 with Malayan; 1 with Samoan. Only 3 (7%) reported as being fluent in another language - 2 of which stated their second language as English and 1 as Maori. 1 student said that though she was not fluent yet, she was learning Maori.

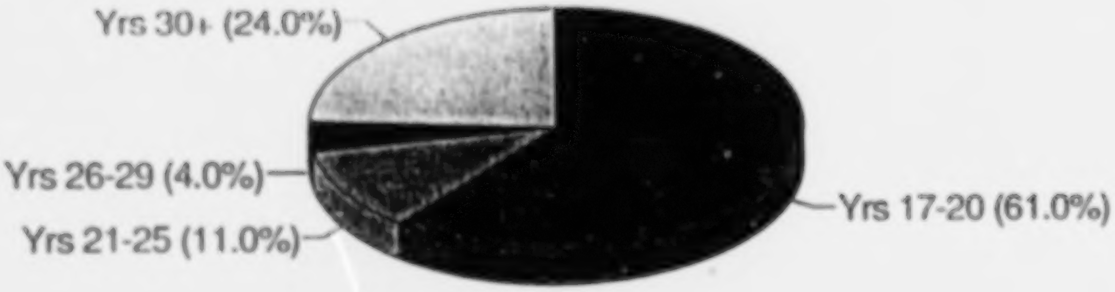
### 5.4 Contact with Early Childhood Centres

11 (24%) respondents identified themselves as parents. Their children had attended a variety of early childhood centres - some of whom had sampled up to four different types of early childhood care. Only 2 children had been cared for in a private home by a paid caregiver. None had been placed in either an all day child care centre or a sessional child care centre. One said that their children had not received any out of the home care or attended an early childhood centre.

Before the students had enrolled at College 31 (67%) said that they had worked in an early childhood centre. Several had experienced work in more than 1 type of centre. The majority, 21 (46%), reported work in a kindergarten; 12 (26%) in a childcare centre and the rest in a variety of other types of early childhood centres. 13 (28%) reported that they had been paid employees; 13 (28%) had worked voluntarily; 9 (20%) had taken part as high school work experience; 5 (11%) as Access trainees; 1 (2%) as Polytechnic work experience; 4 (9%) had been parent helpers; 1 (2%) had participated in an MOT Traffic Safety Programme; and 2 (4%) said that they had relieved at an early childhood centre - but it wasn't clear if this was paid or voluntary.

Fig. 2

AGE GROUPS OF STUDENTS ENROLLED IN FIRST YEAR



### 5.5 Upgrading Training

4 (9%) said that they were undertaking this course to upgrade an existing early childhood qualification - 2 (4%) have a New Zealand Childcare Association Certificate and 1 (2%) had a Field-Based Certificate - but did not identify who had given this training. 1 of the 4 answered NIL to this - so it is unclear what training this person had.

### 5.6 Ultimate Work Destination

20 (43%) identified themselves as only wanting to work in a kindergarten; 4 (9%) as only wanting to work in a childcare centre; 18 (39%) said they intended to seek work in both areas with 4 (9%) also saying that they would look at other areas as well; 1 wanted to work in a Pacific Island Language Nest; 1 in either kindergarten or another area (but not childcare); 1 in either childcare or another area (but not kindergarten). One respondent was undecided.

### 5.7 Alternative Work Option

When asked if they would look at another early childhood area if they could not find work in their chosen area - 41 (89%) answered "yes"; 4 (9%) answered "no" and 1 was undecided. Of the 41 who would look at anothr area, a variety of choices was offered - 15 would look at Nannying; 15 at Childcare (but one would place conditions); 6 at Kindergarten, and the rest listed choices such as Playcentre, Kohanga Reo, Special Needs, New Entrants, Counsellor for Maori, social work, return to College for further training. 3 did not know. The 3 that answered "no" to this question and would not look at another early childhood area listed their reasons as - "prefer social work in early childhood"; "only interested in working with over 2's"; "only want to work with children and not in administration"; "hours of work in relation to my own children getting home from school".

### 5.8 Previous Contact with Early Childhood Centres

When asked if previous contact with early childhood centres had influenced their choice of where to work - 36 (78%) said "yes" and 10 (22%) said "no". There were a variety of reasons - many talked of the enjoyment of the work, several preferred kindergartens because of better pay, conditions, etc. One respondent said she wanted "to teach, not just take care of children". Also several mentioned preferring the "structure" of kindergarten. Those in favour of childcare mentioned, "family atmosphere", "babies through to school age", "previous work experience", "childcare is more personal than kindergarten".

### 5.9 Changed Views Regarding Work Destination

The next two questions related to changing views about where to work and the reasons. 13 (28%) said they had changed their minds since starting the course and 31 (67%) still held firm to the original choice. One was wavering between "yes" and "no". The reasons for changing ranged through "more experience", "enjoyed childcare, but could teach more in kindergarten", "now considering childcare as well/instead of kindergarten", "always wanted kindergarten, now prefer childcare, but kindergarten wages", and "now prefer kindergarten over childcare".

### 5.10 Course

The questionnaire then moved on to consideration of the course so far.

40 (87%) felt that their course gave equal recognition to both kindergarten and childcare services - 5 (11%) thought it had not, and 1 was undecided - placing the tick between the "yes" and "no" boxes. Of the 5 who felt recognition was not equal - 3 thought it favoured kindergartens more and 2 felt that childcare was more favoured. Reasons included - "language and texts used by lecturers"; "lecturers talk quite a bit about birth to two years"; "some tasks and assignments are set for children over the age of 2, e.g. Prof. Studies"; "0 - 2 could be addressed more in Curriculum and Programme Planning areas. Text used, too, could be given more attention".

### 5.11 Postings

The next questions referred to the postings that students are sent out on for teaching practice. 13 (28%) said that they had experienced difficulties during these sessions and 33 (72%) had no problems. The 13 that had problems were broken down into two groups - 9 (69%) had a problem on a childcare posting and 5 (38%) had a problem on a kindergarten posting. One student had experienced a problem in both areas. All the problems arose between students and associates and teachers. Lack of communication was mentioned several times - this reflected on both childcare and kindergarten. One student mentioned that on the kindergarten posting the staff were so efficient that she felt superfluous. On the other hand, one student said of her childcare posting "my associate was unfriendly, unhelpful, not knowledgeable, negative towards children. Other more qualified staff have been extremely helpful". Another claimed that the childcare centre was "badly run and staff hard to children" and another "teachers were not professional most times, especially where the children are concerned". One student complained that she was "feeling inferior, treated as a slave, i.e. clean up" - this referred to both kindergarten and childcare.

### 5.12 Student's View of Status of Childcare and Kindergarten

The next two questions related to the student's view of status of kindergarten and childcare (see Figs. 3A and 3B). All students ranked kindergarten between 3 and 5 (5 being high, 1 low). However, childcare was ranked right across the board from 1 - 5. 4 felt they could not rank childcare at this point. The majority of kindergarten responses were at rankings 4 (20 responses) and 5 (21 responses), 3 gained 2 responses. 16 ranked childcare status at 4 and 12 ranked it at 5 - the remaining responses ranked childcare 3 and lower. When this question is looked at in comparison with how each student ranked both - 14 ranked both kindergarten and childcare as equal; 20 ranked kindergarten as of higher status than childcare; 5 ranked childcare as higher status than kindergarten.

Fig. 3A

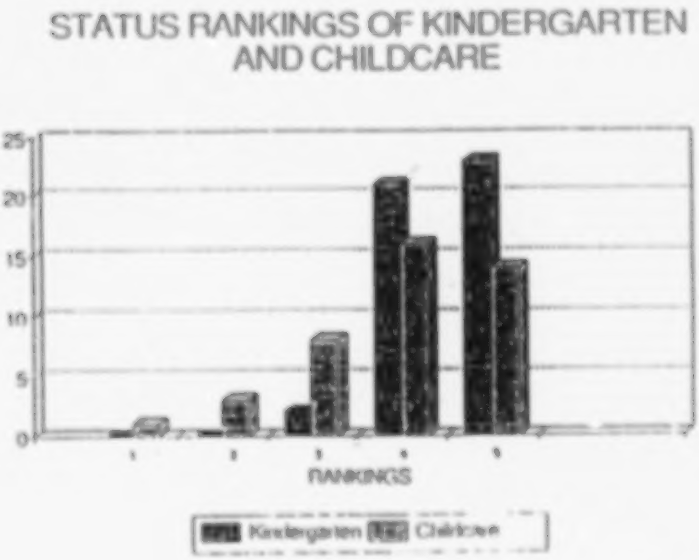
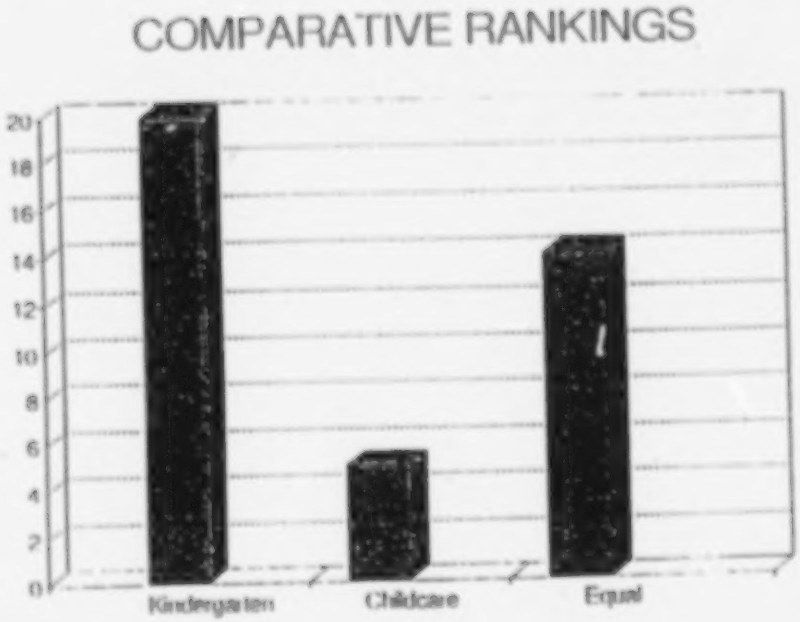


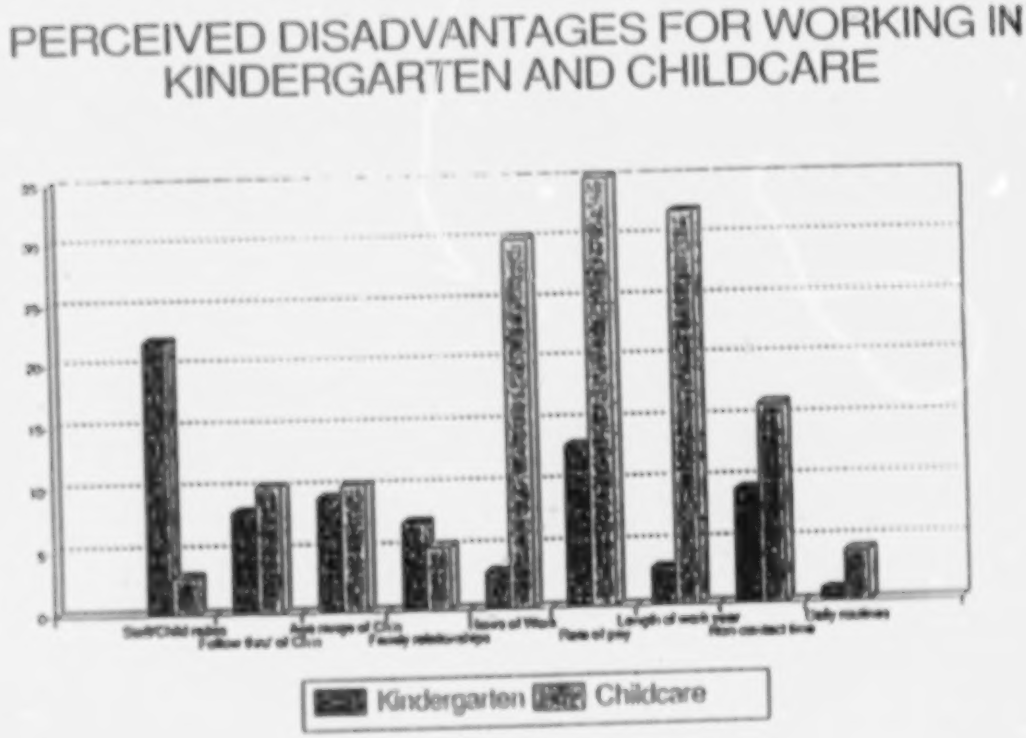
Fig. 3B


COMPARATIVE RANKINGS
20
18
16
14
12
10
8
6
4
2
0
Kindergarten
Childcare
Equal

### 5.13 Opinions Regarding Kindergarten and Childcare

The final question related to a range of ideas which could be seen as either advantages or disadvantages for working in either childcare or kindergarten (Fig. 4).

Fig. 4



Looking at how these ideas ranked as disadvantages - staff/child ratios - 22 felt this was a problem for kindergarten, but only 3 for childcare. Rate of pay was a disadvantage for 13 relating to kindergarten, but 35 felt it a disadvantage in childcare (one student ticked this box 3 times to record her feelings). 30 felt that the hours of work in childcare represented a disadvantage, compared to only 3 feeling this way for kindergarten. Length of work year was also a problem in childcare - 32 responses compared with 3 for kindergarten. Non-contact time also showed up as a disadvantage for 16 people in the childcare section compared to 9 in the kindergarten section. One person did not rank any ideas in the kindergarten section and 4 did not rank the childcare section. The remaining ideas ranked fairly closely for both kindergarten and childcare.

### 5.14 Further Comment

The last page of the questionnaire invited any further comments that students wanted to make. Approximately 25% took this chance and the comments ranged from "I'm not sure that I want to teach but I do enjoy the area of E.C." to one who feels "child psychology interests me and am considering doing a post-graduate course in this area if this is possible". Wherever one student decides to work though her intention is "to try to get as many people 'informed' and 'educated' about the importance of early childhood education and services.

## 6 DISCUSSION

### 6.1 Number of Respondents

When the results of this investigation are compared with Renwick's (1989) results we find some interesting results. 71 took part in Renwick's study (students from both Palmerston North and Dunedin). However, 43 from Palmerston North answered Renwick's survey and 46 completed this survey. Therefore, the sample from Palmerston North is approximately the same - although Renwick's results were combined from the two groups.

### 6.2 Age and Gender

As in Renwick's study all but two were female. This survey showed that there is a larger percentage of older students now enrolled - 14% of Renwick's sample was 25 and older compared to 28% from this study.

### 6.3 Ethnic Origin

Ethnic origin also showed up some differences - Renwick produced 89% as being Pakeha or non-Maori New Zealander. This study produced 74% in the same category. This shows that a positive progression has been made in this area - i.e. encouragement of Maori and other ethnic groups to study at a tertiary level. However, the first language reported is still overwhelmingly English - 95%. So, although there are now more students from other than the Pakeha culture, there are still very few students who speak anything other than English. This fact is of note when considered alongside the issue of biculturalism. If New Zealand is to move positively to being a bicultural, and thence a multi-cultural, society I feel that we should be encouraging students in learning the language of our indigenous people.

### 6.4 Parents

As would be expected with more students in the older age group in this study - there are now more parents who are students. 24% of respondents to this survey were parents compared to 14% in Renwick's. As in Renwick's report the majority had used a variety of early childhood facilities for their own child/ren. However, I was intrigued to find none reported in this survey that they had used a childcare centre - either full or sessional care. It leads one to speculate that none of the students now enrolled have pre-schoolers. Or, if they do, that they have a spouse at home to care for the child. Another alternative could be that they have made arrangements for the free care of their child with a relation (i.e. grandparent).

### 6.5 Previous Contact with Early Childhood Centres

Another big difference emerged between the two surveys - this time in previous contact with early childhood centres prior to enrolling at College. Renwick reported 48% as having worked in an early childhood centre. This survey showed an increase to 67% of students with previous work experience in early childhood. As in Renwick's study there was a range of types of work experience from high school across the board to full-time employees. This I feel shows a commitment to improving the quality of people who will work with our future generations. Obviously, the previous contact (in a variety of forms) has spurred these people on to increasing their knowledge of early childhood, and that these same people have seen that there is indeed a career to be had in this field.

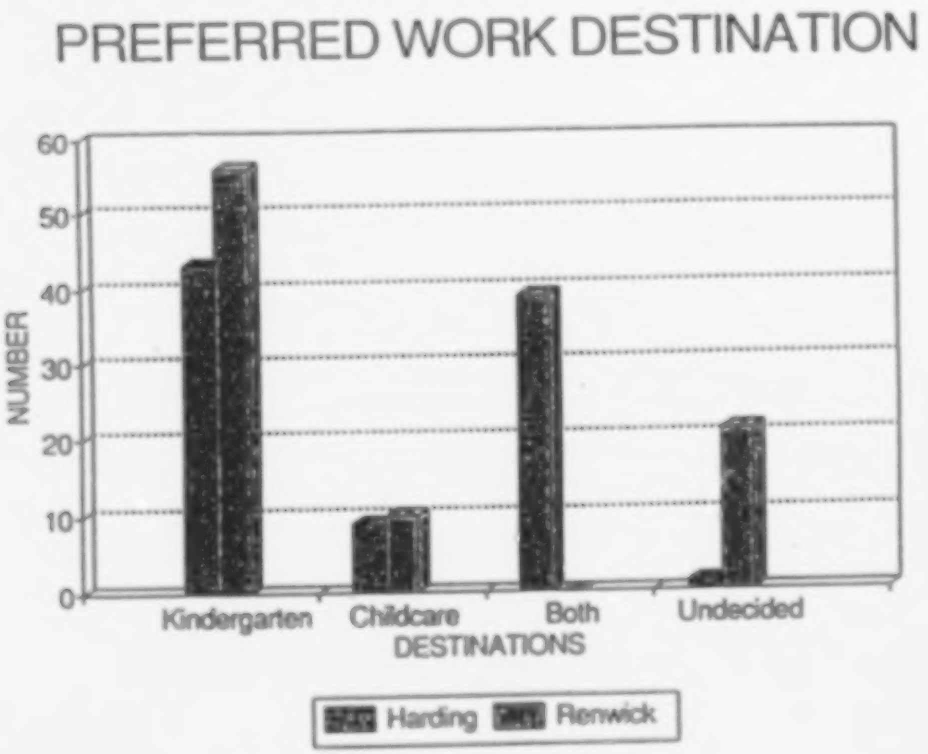
### 6.6 Upgrading Training

I had speculated at the outset of this project that there was a possibility of an artificially inflated figure for those interested in childcare because of those enrolled to upgrade qualifications already held. Interestingly, only 4 students reported that they were in this category. I had expected to find a larger percentage here. This may change, however, in the near future when the uncertainty regarding equivalence of qualifications is settled and currently employed personnel find out where they stand on the recently introduced points scale. This is an issue of great concern to many people working in the childcare field. A Blueprint for training was issued in mid-1990, but this document set out general guidelines regarding equivalency. The finer detail regarding specific qualifications held by people in the field has yet to be finalised. At the time of writing this report the New Zealand Qualifications Authority (NZQA) have still not made public this information.

### 6.7 Preferred Work Destination

When we move on to preferred work destination I found some interesting comparisons with Renwick's results (Fig. 5).

Fig. 5



In this study 43% identified as only desiring to work in kindergarten and 9% as desiring only to work in childcare. This compares with Renwick's figures of 56% and 10% respectively. It was also shown in this survey that 39% would consider both work options. Only 1 student in this study was undecided compared to 21 in Renwick's study. I feel that this shows students are now entering College with a more open mind as to the work options offered in early childhood. This view is also reflected in the large number (89%) who said that they would look at another early childhood area for employment if they were unsuccessful in their chosen area. This reinforces the view that they see early childhood as a definite career option.

### 6.8 Consideration of Course

As shown in the Results the majority of students believed that their course so far has given equal recognition to both kindergarten and childcare - the split of the five who thought unequal attention had been given was almost evenly divided between the two services. This reflects a somewhat different view to some casual opinions I have gained over recent years. So, it is encouraging to note that at this point the majority of these students feel strongly that each service is getting fair treatment.

### 6.9 Posting Experiences

The most disturbing information gained, I feel, was the amount of dissatisfaction with the "postings" the students experience throughout their course. As reported earlier, 13 students reported "difficulties" during a posting. ("Posting" is a term used to describe a length of time a student goes out from College into an early childhood centre - kindergarten, childcare, playcentre, etc. - to gain practical experience and to conduct observations and assigned tasks). Of those 13 students 9 reported problems in childcare centres as compared with 5 who had a problem in a kindergarten setting. I found the reports which criticized childcares were more strongly worded than those referring to kindergartens, and they suggested a lack of professionalism and possible lack of training and sympathy to children. This is a sad indictment on a group of local centres who have worked hard to promote an image of "quality" care. One possible explanation could be that some of these centres have become so involved with the continually changing interpretations of the regulations with regard to what the physical surroundings (i.e. buildings and grounds) should consist of, that they have forgotten the all-important reason of why they are there - the children. However, in fairness to these local centres - one must also remember that a bias has been shown in preference for kindergartens by the respondents. So, it is maybe not surprising that more problems present themselves in childcare postings because the students are not so enthused in this work situation. One student wrote "One of the workers in the day-care centre wouldn't let me get involved and I found it frustrating ...". This I feel could well suggest a childcare employee feeling threatened by a newcomer. Childcare personnel are in the grips of a major problem at present. For many years they have taken part in their own industry training - but recently changes have come about rapidly with little consultation at the grass-roots level. Childcare employees are now anxiously waiting for the publication of the previously mentioned points systems which will peg their existing training at various levels on a scale. For most, this points scale will mean that their training is no longer considered totally adequate and they will be faced with many hours of further training in order to upgrade to equivalence with the three year College course. However, for whatever reason these comments have been made, I feel that childcare centres need to take a look at what is happening in their centres.

### 6.10 Status of Kindergarten and Childcare

It was interesting to see, too, how the respondents ranked the status of kindergartens and childcares. The rankings ranged from 1 (low) to 5 (high). Not one respondent ranked kindergartens 1 or 2, and only two ranked it as 3.

Childcare, on the other hand, was ranked at every level by some respondents with the largest number ranking it at level 4. The bias towards kindergartens showed again here with 20 respondents ranking kindergartens with higher status than childcare. Only 5 felt that childcare was of higher status - a distinct minority opinion. It must be noted, however, that although students were asked to rank childcare and kindergarten as they themselves perceive it - it is difficult to know whether or not they took sufficient note of the personal view asked for. Perhaps they ranked the two services according to perceptions held by the community, which could reflect a quite different viewpoint to their own. It was satisfying to note though that 14 felt they were of equal status - so at least there is a body of students coming through the system who place the two services on an equal footing.

### 6.11 Opinions Regarding Childcare and Kindergarten

The final point of discussion was the range of ideas presented at the end of the questionnaire. The respondents were asked to rank them with regard to kindergarten and childcare as advantages or disadvantages. Even at this early point in their training I found that the students felt able to rank these ideas. Three ideas came through as major disadvantage relating to childcare - these were:

(1) rate of pay;
(2) length of work year;
(3) hours of work.

This ties in with Renwick's results when she reported that:

> By far the most common reason [for not wanting to work in childcare] was the poor pay and working conditions including long hours and short holidays.

Although it did not show up as such a major concern, rate of pay was also ranked as a disadvantage in the kindergarten area by 13 respondents.

Staff/child ratios came through as the major disadvantage relating to kindergartens. It is of interest to record here that the respondents are aware that kindergartens provide a low staff/child ratio (i.e. 2 or 3 staff to 40 children), whereas childcare provides a better ratio (i.e. 1 staff to 10 children over 2 years old, or 1 staff to 5 under 2 year olds).

Non-contact time in childcare was also a problem for 16 students. Under childcare Awards, employees must be allowed a period of non-contact for duties other than working directly with children, depending on how long their work day is. Maybe students are not receiving this benefit whilst they are in some centres, and if this is the case then this is possibly something the College could look at negotiating with centres when sending students out on postings. Kindergarten teachers have five hours non-contact time per week - this time is to allow for programme planning, minor maintenance, administration, parent contact, but at times some of this period is used to offer pre-entry classes for the next intake of children. The Consenting Parties award mentioned earlier allows for one hour non-contact time per day for a work day length of over six hours. This would seem to be a better arrangement than some kindergarten teachers have, as the childcare employee is not expected to have any contact with children during this hour (with the exception of an emergency). This allowance can be accumulated to a maximum of 3 hours before taking it, so it can be taken in block amounts as in kindergartens.

## 7 CONCLUSION

As stated at the outset of this investigation, I wished to discover whether or not there had been any improvement in the numbers of students intending to work in the childcare field. If not, then I wished to discover what the reasons were.

I am able to report, however, there appears from the results presented here, that some progress has been made in the acceptance of childcare as a viable work option - still not as a first choice, but definitely as an option. I am still concerned that although a reasonable percentage indicated they would look at both kindergarten and childcare for positions that the childcare choice would only be a short-term measure until a kindergarten position became availab There is no direct evidence to support this view, only a feeling that unless the variables between the services even out that this is a distinct possibility. This was an area that was not covered by this study and I do feel that it is of major concern. If changes are made in pay rates, how-ever, for childcare positions I feel that this would go a long way to encouraging graduates into childcare as a long-term career. Childcare pay rates came through as a major disincentive to the students in this survey - as it did in Renwick's. When "Before Five" reforms were instituted it was hoped that the improved funding would allow wages/ salaries to become equitable. However, there was no government directive issued to state that a percentage of the funding had to be used for this purpose. It was left up to individual employers to decide how the money should be spent. There are now calls (Dominion Sunday Times, October 1990) for early childhood centres to have the bulk funding tagged for specific use, and for all centres to be accountable for the money they receive. One solution to the pay rates issue would be for the government to take over this part of the financial management of early childhood centres. All early childhood staff would then be paid on the same scale throughout the country with no distinction made as to which service they are employed in. Kindergarten teachers are paid on this basis, as are all teachers throughout the education service. This would also raise the image of childcare employees to be accepted as "educators" of our young, rather than mere childminders.

Long hours worked in childcare was another cause of concern and I hope that sometime in the future there may come a solution to this problem. This would go some way to solving the feeling of being undervalued babysitters which leads on to the burn-out as identified by Passmore.

With more students showing a greater interest in childcare one can only hope that slowly the public perception of childcare will be raised and it will stand, as it always has, with its head high alongside the kindergarten service, but also be accepted as an equal partner in the field of early childhood education.

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# Infant and Toddler Centre Programmes in Britain and the US.

Tony Holmes

## 1. Introduction.

This afternoon I'm going to talk about my visits to some early childhood centres in Britain and the US which cater for infants and toddlers. I'll briefly describe the background to infant and toddler programmes in each of these countries, give some information about the centres, and finally discuss what I think we can learn from this. I will focus on teacher education, teacher deregistration and the professionalism of early childhood teachers.

In Aotearoa and throughout the US and western European countries there has been an increasing demand for places for infants and toddlers in early childhood centres (defined as children under the age of 3 years, except in this country where we usually refer to the under twos). There is also a need to improve the quality of existing services (Pichault, C. 1984; Dept of Education 1986). Actual provision varies widely from country to country, and from state to state (Cohen, B. 1988; Moss, P. 1988; Ad Hoc Day Care Coalition,1985). The main resistance to the development of infant and toddler programmes has been its relavively high cost. To offer a quality programme for infants and toddlers requires more resources per child place than for older children and therefore involves greater costs per child place.

In these advanced industrial nations the proportion of women working outside the home in paid employment has increased over recent years. This has resulted in an increasing demand from families for early childhood services. Whether the state, local government, private, institutional or community groups should provide these services has been vigorously debated. There is also the issue of whether very young children should be in centres at all. The younger the children the hotter the debate. For example, governments and some academics still use the myths of (maternal) deprivation to scare parents and dampen demand for infant services (Belsky and Alison Clarke-Stewart, 1988). Most early childhood teachers are satisfied that a quality programme for infants and toddlers enhances children's development without adverse effects.

In Aotearoa, places for under twos in centres have increased as more and more centres responded to the demand. The biggest increase in places occurred recently, between 1989 and the present, when the new rates of bulk funding attracted interest from both private and not-for-profit centres. Between1989 and 1990 there was a 3-4 fold increase in the number of under twos in centre programmes from about 2000 to about 6000 (MoE statistics) New centres exclusively for infants and toddlers were set up and a significant number are still in the process of setting up. In spite of the feeble official minimum standards many centres have used this funding to improve staff:child ratios, increase the training opprtunities and wages of their staff, and reduce fees. This financial incentive has been cut back following the 1991 Budget. It had been $7.25 / child place /hour and will reduce to $4.50.

In Aotearoa no extensive, systematic or longitudinal studies into infants programmes have been completed. The need for more information has been a concern for a number of years. In 1990 Val Podmore and Barara Craig(SSRFC pilot research, NZCER main research) began to investigate the organisation and policy implications of infant care in centres in Wellington and Auckland. However, back in 1988 I was keen to visit some high quality infant toddler centres while overseas on a Winston Churchill grant. At that time I was working for the NZ Childcare Association as an adviser to childcare centres in Wellington. I had had the opportunity to observe infants and toddlers in Wellington centres and I was shocked at the conditions under which some infants were cared for. They were often left out of the programme, and rarely was any specific programme run for them. Some inexperienced workers were of the opinion that infants did'nt do much and therefore nothing much was done for them other than keeping them fed and clean. Most of the time was spent feeding, changing and cleaning up, with little time for play, and without an understanding of the many learning opportunities that can accompany these experiences, or the skills to pursue them. I was disturbed that this neglect was happening to our most precious and vulnerable children at a time when their potential for learning was so great. I was myself also largely ignorant of how infants needs could be adequately met in the centre situation.

The information I obtained from visits to centres and my discussions with teachers was not systematic research. It was not planned as such. I didn't have the resources for it. However, in preparation for my visits to centres I put together a quality checklist. This was used to remind me of all the things I wanted to find out about. Many of the visits were arraged at short notice through personal contacts made after arriving in the area. Local knowledge was a good way to locate quality programmes. A few of the appointments were set up from NZ. Most of the information I obtained was about the organisation or management of infant toddler programmes. Due to time limitations observations of children in programmes was secondary to this.

## 3 In Britain

### 3.1.Introduction

In Britain provision for the under threes is inadequate to meet needs and there is considerable variation from region to region. The different services are provided by different agencies for different groups of children and reflect the agenda of local politics. Labour controlled areas generally have more public facilities than Conservative areas. There is a clear division between education and care. Day Nurseries, Family Centres, and childminders or home-based care are perceived as "caring" for children, and playgroups and Nursery Schools as offering "educational" programmes. There is a demand for Day Nursery places for almost half of the 2 million children under the age of 3 in the UK (Bone, M,1977). Less than 2% are catered for by publicly funded services in Day Nurseries and the newer Family and Combined centres (Moss, P. 1988). Most of these children are referred from health or welfare agencies because they are defined as "at risk". They are mainly from poorer families. A recent innovation has been the formation of Combined Centres, i.e. a Nursery School and a Day Nursery provision combined in one location, of which there were around 50 in 1989. Childminding and private nurseries and voluntary childcare organisations attempt to fill the shortfall in provision.

Nursery "teachers" are trained for 4 years (B.Ed. or 3 year degree plus one year teacher training ) to work with children from 3 years of age. Their qualification also allows them to teach in schools. Nursery "nurses" are trained for 2 years and receive the Nursery Nurses Examination Board qualification (NNEB) to work with children from birth to 8 years. The nearest NZ equivalent to this would now be the one year Nanny qualification plus the second year of the Diploma course offered by institutions like the NZ College of Early Childhood Education in Christchurch.

### 3.2. The Centres

I visited Day Nurseries, and Combined Nursery Centres in London, Glasgow and Lancashire. The London centres were long established whereas the centres in Lancashire were newly opened Combined Centres in Blackburn and Lancaster(July 1988). In Glasgow the centres I visited were established and operating under new policies developed by the innovative Pre-Five Unit of Strathclyde Regional Council.

In all the centres there were no fees, or minimal fees. About 90 pence per day-about $3- was the maximum. Meals were charged separately. The centres were financially supported by the Dept of Health and Social Security(DHSS), by local authorities, and by charitable trusts. Most of the families served by these programmes would not be able to pay. Most were open for 5 days per week, but some were available for 7 day, 24 hours per day care. One was open 365 days of the year. Parent participation was encouraged. Some centres had a parents' room. All children were assessed for all round development on a regular schedule. Some provided an evening creche so that parents could attend meetings, leisure activities and classes.

Between 30 and 100 children from birth to age 5 years attended each centre for full and part days. Maximum group size for infants was 10. In most centres places were allocated according to need and this was regularly reviewed. Staff:child ratios for infants varied from 1:2.5 to 1:5 according to age. The staff were exclusively carers and teachers. There were, by NZ standards, numerous extra staff, e.g. administrators, cooks, cleaners, caretakers, laundry workers, and maintainance staff. Because these centres are also community centres there were often resident social workers, speech therapists, doctors and health workers. One centre had a minibus and a driver/gardener. Many had toy libraries, subsidised by the DHSS with no user fee. Some were used as "drop in" centres by childminders and the children in their care.

The implementation of the new Combined Nursery Centres has been frustrated by staff disputes. The Nursery Teachers and Nursery Nurses who staff these centres are, in the majority of centres, working under different salaries and conditions. The teachers earn more, have better working conditions, but are less knowledgable and experienced in the care of infants, and yet are expected to do the same work in the same programme on the same premises as the nurses. These tensions affect the performance of the staff and the quality of the programme. In a study of 20 combined centres (reported by Gillian Pugh from a study by Liz Murphy at the National Children's Bureau) nearly all of them which were set up to operate in a co-ordinated way, i.e. day nursery and nursery school, are actually composed of the two separate programmes, i.e the Nursery Nurses and the Nursery Teachers do not work together. In Glasgow, new policies produced by the Strathclyde Regional Council have enabled a more flexible staffing structure to be created which hopefully will overcome most of the problems in the present system. Although Day Nurseries and the Combined and Family Centres offer just as comprehensive an educational program as nursery schools, there is a social stigma attached to those families who need to use them.
As Gillian Pugh from the National Children's Bureau told me,
"In UK the government sees daycare as something that is only appropriate for families who have failed... There's still the stigma attached that only families which have collapsed can have daycare and everybody else has to struggle on alone."

## 4. In the US

### 4.1 Introduction.

In the US there is a lack of reliable statistics concerning the provision and quality of early childhood programmes. However, it is estimated that there are about 2 million children in day care. Nearly half of all infants and toddlers (under3) have working mothers (US Bureau of Census, 1985). Centres are operated by individuals and corporations for profit, church affiliated groups(some of which are also run for profit, i.e. not by the church themselves), employer and employee sponsored centres, parent co-operatives, the federally funded Head-Start Programs, other federally funded special education centres in public schools, public school kindergarten programmes (for children age 5-6yrs), and housing development day care. The federal Title XX Act reimburses states for 75% of the cost of childcare programmes that serve families where parents receive public assistance money or social security income, or the gross family income is below a certain level.

The US has no Federal regulations and each State has set its own regulations governing daycare programs. 42 states do not require any special training for childcare staff, and only 24 states require any child development training for directors of centres. Only 4 states require staff:child ratios to be 1:3 for infants and 1:4 for toddlers while many other states have the dangerously low ratios of 1:7 for infants and 1:12 for toddlers respectively. Only 20,000 out of estimated one million childcare workers are unionised. Most have short term employment contracts and poor conditions of work. However, there are centres with high quality programmes which serve as good models for infant and toddler care and education.

### 4.2 The centres

I visited infant/toddler centres in Massachusetts, New York, Texas and California. These states have recognised quality childcare standards and regulations. All the centres I visited were not-for-profit centres whose own standards exceeded the regulations of the state authorities.

Group size for infant and toddler care varied from 6 to 12 for under 2 year olds, and up to 16 for 2 to 3 year olds, with staff:child ratios of 1:3 and 1:4 respectively for the two age groups. The centre size varied from 50 staff and 150 families in a mixed age centre down to 2 staff and 6 children at a new centre for babies There were large waiting lists of between 50 and 300 for each centre. Parent help was encouraged in all centres, and at one centre parents were expected to give 4 hours per month to work for the centre.

Fees in Massachusetts ranged from $164 to $215 per week, and in California from $135 to $180. (NZ$200-320 which compares to current NZ fees of $110-150). In some cases these were subsidised, e.g. for hospital employees using a hospital centre, and for low income families by the state. However, the majority of families using these centres were in the middle to upper income bracket. High quality care is expensive and often only those on good incomes could afford to use it. The centres used about 75-80% of their income(mainly fees) to pay their staff.

Most centre Directors, and other senior staff including Head Teachers had Bachelor's (4 years) or Master's degrees in early childhood plus a number of years of experience. Their salaries ranged from US$20,000 to $40,000 (NZ$30,000-$60,000) per annum depending on levels of responsibility, centre size and what the centre management were able to pay. Teachers, many of whom had a 4 year degree, earned US$14-17,000 (NZ$20,000-$25,000), and Assistants with an Associate's degree(2 years) earned about US$10,000 ($NZ15,000) per annum. High school and college aides were paid between $3.35 and $5 /hour(NZ$5-$7.50).

As in Britain centres had non-teaching staff , e.g. cooks, cleaners, janitors, and office workers. Two of the centres had full time Education Directors responsible for staff training and curriculum development. Staff had an average of one and a half hours per week training. Many had part-time nurses, music teachers and other specialist staff.

At one centre a $50 fee was charged for enrollment and interview with the director, and families pay $25 per month for disposable diapers, and $75 per year for insurance liability. There is no Accident Compensation scheme in the US and everyone is acutely aware of safety. Not only for the sake of the children, but also for the financial survival of the centre. Centres, their directors and teachers have been financially ruined through successful litigation for alleged negligence.

## 5. Discussion and Conclusions

Much of what I found in Britain and the US reinforced what many of us already know about providing a quality infant and toddler environment. That is, a suitable physical environment, a developmentally appropriate curriculum, and qualified teachers with specialist knowledge and skills to work with this age group, working in a supportive environment-a good employer, good conditions of work, optimal staff:child ratios and child group size.

Although we have made huge advances in many of these areas over the last few years, we have not yet attained a professional status for ourselves. Centres in Britain and the better US centres I visited employ ancilliary staff, e.g. cleaners, cooks, administrative and maintainance staff. This enables their early childhood teachers to use their time, skills and energy to focus on their specific role as carers and educators. In the majority of centres in NZ the childcare worker or early childhood teacher has been expected to be a "Jill or Jack of all trades" and often perceived by the public and the government to be "mistress or master of none." Although early childhood teachers have been professionally trained to work in the most demanding and important work in our society they often do not see themselves, and are not perceived by most of the public, and the politicians, as professionals. To many people working with infants and toddlers is just "babysitting". This is not surprising when our government and some of our employers are attempting to further devalue, deskill and deprofessionalise our work. The Employment Contracts Bill is being used to reduce wages, conditions of work and security of employment, and to destroy our union's powerbase. Teachers are no longer required to be registered. In the US many early childhood teachers are paid very low wages, have poor working conditions, little job security, and most lack union protection. Employment contracts are commonly for only the 9 or10 teaching months of the year.

Another facet of the progress toward professionalism is the status of teacher qualifications. The integration of pre-service early childhood teacher education at colleges of education in NZ has become the model for basic level training. With the recent diversification of training opportunities with the emergence of many alternative training providers, and the downgrading of the "points" required for equivalency, recognition of the 3 year Diploma in Teaching as the basic qualification for all early childhood teachers is jeopardised. The specialist training of teachers to work with infants and toddlers in centres is especially threatened. The government, through programmes like "Parents as First Teachers," is attempting to force infant care, as it describes it, back into the home. Either with mothers encouraged to stay home, or into Family Day Care or informal arrangements. The government is trying to gain support for the notion that infant and toddler care does not require the knowledge base and skill level required for older children. The government believes that Plunket Nurses are able, with little extra training, to be able to take over the work of early childhood teachers. One year nanny school training or two year NNEB equivalent training, both available in NZ, may become the new benchmark qualification for the care of infants and toddlers. This would be a retrograde step. All this is happening only 5 years on from the transfer of childcare from the Dept of Social Welfare to the Dept of Education which marked the beginning of the integration of childcare with the other early childhood services and the acknowledgment that child-care was care and education. NZ provided a model example in overcoming the two-tier system perceived by many as "care" and "education" that still exists in most of Britain(Nursery Nurses and Nursery Teachers). We are now being cajoled into a new multi-tiered system of qualifications which will further inhibit the establishment of our professional status.

All of these issues are, of course, ultimately to do with the governments desire to cut funding. Through its ignorance of the needs of infants and toddlers and its drive to cut spending this present government has downgraded the centres' physical environment and staffing levels and is threatening the viability of some centres catering for infants and toddlers. Those families who are "at risk" and are desparately in need of centre based care will be targetted as they are in Britain and the US and subject to the new stigmata, the Kiwi Card. In fact, many of this government's gross errors in the education policy field have been picked up in the US, or from Britain. When will our government stop employing the unacceptable policies of the World's foremost monetarist nations in order to shape education in New Zealand?

We must resist by demanding the reinstatement of teacher registration, and be determined to hold on to the 3 year Diploma as the basic teacher qualification for all early childhood teachers.

We must ensure that the government understands that teachers of infants and toddlers need specialist knowledge and skills in addition to basic level early childhood training.

We need to continue to build good public relations, maintain our unions and associations, and to keep everyone informed about the great work we do.

It is essential that we do everything we can to provide the very best of environments for the centre based care and education of our smallest and most vulnerable people.

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# COMPARISON BETWEEN SWEDISH AND BRITISH PRESCHOOLS OF CHILDRENS ACTIVITIES, LANGUAGE AND GROUP CONSTELLATION

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## Aims of the study

The presented study is part of a large and comprehensive study of Swedish preschools made in 1984 by Kärrby. This study was modelled by an earlier study in Britain made by the Oxford Preschool Research Group and presented by K Sylva, C Roy and M Painter in the book Child Watching at Playgroup and Nursery School published in 1980. It is therefore possible to make comparisons between preschools in the two countries on overall as well as detailed level.

In the present study the intention is to compare and interprete the results from the two studies in relation to

1. Swedish and British child care policy

2. Educational traditions and philosophy

3. Differences in function and organization of the preschool

International comparisons throw light on variations in ideological and philosophical features of education that are not usually detectable in other studies. As both the Swedish and British samples include preschools with different forms and functions it is also possible to draw conclusions as to organizational factors.

In interpreting the results my main assumption is that there is a relationship between the educational environment of the preschool and political, ideological and structural frames including preschool provision. In accordance with the ecological theory of Urie Bronfenbrenner (2) it is assumed that educational content and indirectly the development of the child is influenced by past and present social, political and cultural conditions. In building up a system of child care it is important to recognize the role of the preschool (including all kinds of child care facilities) in the total political and economic development in the country.

Preschools are an important part of the Swedish family social support system. Dating back to the 30th with Alva and Gunnar Myrdal as prominent figures, preschool education in Sweden is seen as an important part of the public welfare policies. In after-war Sweden provision of preschool places in the form of day care was a means to liberate women labour. In the 70th the equality of men and women was the main argument for the expansion of preschool places. In 1975 a law was passed that guarantied a preschool place for all 6 year olds and in 1985 a national educational program for preschools was accepted by the Parliament. A decision was taken by the Parliament in 1987 that preschool places should be available for all preschool children in need of a place. The political aim is to guarantee each child a preschool place whose parents want or need it. This is proposed to become a law.

In contrast to Sweden, preschools in Britain are not seen as part of a family social program. Child care is the responsibility of health authorities and have no connection to preschools which are part of the educational system. During the last years public funding for full time day care has decreased. As stated by Jerome Bruner in 1980, (3) the promises of preschool places for all who wanted it, made in Mrs Thatcher's 1972 White paper, Education: A Framework for Expansion, were not fulfilled. In the National Children's Act presented in 1989 there is a strong support for preschools exclusively functioning as educational institutions. To save costs, many preschools are working on part time basis thus excluding the possibilities of full time work for the parents, usually the mother. Percentage of places for preschool children of working mothers in different form of child care in shown in table 1.

Table 1. Percentages of preschool age children with mothers working full or part time in different forms of child care in Sweden and Britain 1987

| | At home | Relatives Private | Nurs (FTP) | Fam d.c. |
|---|---|---|---|---|
| **Sweden** | | | | |
| Full & part time | 14 | 9 | 42 | 36 |
| **Britain** | | | | |
| Full time | 19 | 52 | 15 | 29 |
| Part time | 56 | 30 | 9 | 13 |

Source: P Moss (1991)
Note: When sums add to more than 100 more than one arrangement is included.

Provision and forms of preschools in Sweden and Britain

There are two main forms of Swedish preschools, full time (day care) and part time (formerly Kindergarten). Full time preschools (FTP) are available for children whose parents are both working or studying. Part time preschools (PTP) are available for all children between 4 and 6. About one third of all 6 year olds, about 20 % of the 5 year olds and only a few 4 year olds go to PTP. According to official policy the same educational content should characterize the two forms of preschool and be based on the Preschool Educational Program.

The expansion of public child care in Sweden has been rapid since 1965 as can be seen in table 2.

Table 2. Proportion of children 0-6 in public care in Sweden 1965-1990

| | 1965 | 1970 | 1975 | 1980 | 1985 | 1990 |
|---|---|---|---|---|---|---|
| Full time preschools | 1.5 | 4 | 9 | 18 | 28 | 33 |
| Family day care | 1.5 | 4 | 6 | 13 | 17 | 19 |
| Sum | 3.0 | 8 | 15 | 31 | 45 | 51 |

The main organizational differences between the two forms of preschool are shown below

| | | | | |
|---|---|---|---|---|
| Full time preschool | 1-6 (10) year old children | 7-10 hours a day | Group size 12-18 | 2 preschool teachers<br>1 nurse |
| | Fee (200-2000 SEK a month) | Parents employed or study | Children with special needs | 10-60% of 1-6 year olds attend |
| Part time preschool | Mostly 6 year olds or 4-6 | 3 hours a day | Group size 15-20 | 1 preschool teacher<br>1 nurse |
| | Free of charge | Parents at home or employed | Every child right to attend | 98% of 6 year olds and some 4-5 years attend |

Summary of the Swedish study

Individual observations of 5-6 year old children were made in 73 full time and 42 part time preschools. In each preschool observations were made during 20 continuous minutes during different times of the day of five randomly chocen children. The activities, language and group pattern were registered according to the system used in the Oxford Preschool Research Project. Altogether 559 children were observed in 19 municipalities on the west coast of Sweden. Half the preschools were situated in the city of Gothenburg and the other half in towns and villages.

Information about the organizational structure of the preschool such as staff/child ratio, group size, working conditions of the staff, the size of the preschools, the social character of the uptake area and fees were collected by a questionnaire.

The educational structure was studied by the registration every 15 minutes of the activities going on during two half days. The planning, direction and regularity of the activities were judges on a 3-graded scale. (These data are not presented in the present paper)

The study comprises about 22.000 minutes of preschool activities, anguage discourse and group constellations treated as dependent variables, and a number of frame factors treated as independent variables. The data have been analyzed statistically mainly by frequency comparisons, correlations and variance analysis methods.

Summary of the British study (here called the Sylva study)

The Sylva study (11) was made in three types of preschool, Nursery school (NS), Nursery class (NC) and Playgroup (PG). About the same number of each kind of preschool was represented in the study. They were situated in both cities and villages. In all, 120 randomly chosen children were observed in 19 preschools, about 6-7 in each preschool. Half of the children were 3.5-4.5 and the other half 4.5-5.5 years old. The British children were thus one or two years younger than the Swedish children.

## Main results

One of the aims of the Swedish study was to compare FTP and PTP. Therefore, in all the comparisons the two forms of preschools were separated. In the Sylva study the three forms of preschools were separated in only some of the comparisons.

TABLE 3. Comparisons of results from the Swedish and British study. Distribution of percentages of different activities.

| | SWEDEN | | | OXFORD |
|---|---|---|---|---|
| | Full time | Sign p<.05 | Part time | |
| Large muscle movement | 4.0 | x | 1.6 | 9.8 |
| Large scale construction | 1.9 | | 2.2 | 0.9 |
| Small scale construction | 2.4 | | 2.5 | 4.3 |
| Art | 7.7 | x | 11.5 | 8.3 |
| Manipulation | 3.6 | x | 6.2 | 12.0 |
| Adult directed art and manipulation | 3.4 | x | 6.0 | 0.6 |
| Structured materials | 3.9 | x | 5.7 | 4.5 |
| Three R's activities | 3.4 | | 3.8 | 0.6 |
| Games with rules | 4.6 | | 6.1 | - |
| Music | 1.2 | | 0.9 | 0.3 |
| Group activities | 9.5 | | 9.7 | 7.7 |
| Problem solving | 0.2 | | 0.2 | 1.7 |
| Examination | 0.1 | | 0.1 | 1.5 |
| Pretend play | 10.6 | | 9.9 | 10.4 |
| Scale version toys | 2.6 | | 3.4 | 2.3 |
| Informal games | 3.3 | x | 0.9 | 3.1 |
| Spontaneously structured play | 1.5 | | 1.1 | 0.8 |
| Organized play | 2.1 | | 1.3 | 0.1 |
| Social interaction, non-play | 10.0 | x | 4.6 | 7.0 |
| Standing around | 1.8 | | 1.1 | 1.0 |
| Cruising | 1.2 | | 1.3 | 2.0 |
| Purposeful movement | 5.1 | x | 5.8 | 3.0 |
| Waiting | 1.9 | | 2.1 | 1.4 |
| Watching | 5.4 | x | 6.6 | 9.4 |
| Domestic activity | 7.5 | | 4.9 | 7.1 |
| Theme length (average) | 1.45 | | 1.38 | |

The overall pattern shows that there are great similarities between the British and the two forms of Swedish preschools. For example, the frequencies of pretend play and play with small version toys are almost the same. The sum of "passive" activities are also very similar.

Clear differences can also be found, however, such as in the frequencies of large muscle movement (gross motor play), manipulation and adult directed art activities.

Combinations of categories were made into the following groups of activities

Creative and manipulative (Construction, Art, Manip. Struc.mat. Mus.)
Fantasy (Pretend, scale version toys)
Adult led (Creative & Group activity)
Cognitive (3 R's, Rule games, Probl. Ex.)
Social (Play and interaction)
Large muscle movement
"Passive"
Domestic

Comparisons are made in diagram 1

Diagram 1

British preschools are found to differ from the two forms of Swedish preschools mainly in three areas. Adult led and cognitive activities are more common in S preschools while gross motor play is more common in B preschools.

In some areas the B preschools are more like our PTP than FTP. This is particularly noticeable in the area of creative and manipulation activities where B preschools are more like PTP than FTP in which social interaction is more prevalent.

Large differences are found between the different forms of B preschools, Nursery schools (NS), Nursery class (NC) and Playgroup (PG), on separate activities indicating a great variation among the B preschools. Pretend play and manipulation are particularly common i NC. In NS the frequency of gross motor play is high while in PG adult led activities are common. (Table 3:b Appendix).

Group constellation
Being active in a group or alone is an important aspect of the socialization process. From table 4 and diagram 2 it is shown that there is a great variation between the three kinds of B preschools in group constellation. The large difference between S and B preschools in group activity is particularly interesting. Nearly one half of all activities in S preschools are carried out in small or big groups. In B preschools, activity carried out alone, in pairs or parallel are much more common. I will return to these facts later.

TABLE 4. Comparisons of social grouping between full time (FTP) and part time (PTP) Swedish preschools, Nursery school (NS), Nursery Class (NC) and Playgroup (PG). Percentages of total time

| Group constellation | FTP | PTP | NS | NC | PG |
|---|---|---|---|---|---|
| Alone | 9 | 11 | 19 | 16 | 13 |
| Parallel and pair child-adult | 27 | 28 | 38 | 27 | 33 |
| Pair child-child | 20 | 20 | 24 | 33 | 24 |
| Large and small group | 44 | 41 | 19 | 24 | 30 |
|  | 100 | 100 | 100 | 100 | 100 |

Diagram 2

Language communication

In preschool research the quality of language communication and interaction between the child and the adult has been found to be the most important factors contributing to the competence of the child as found by e g Tizard et al (12), Clarke-Stewart et al (4) Phillips et al (9). In my own and Sylva's studies a relatively crude measure was used, categorizing language interaction as dialogue vs monologue. Aspects of quality can be assumed to be connected to frequency of dialogue and frequency of total language communication. In table 5 the frequency of dialogue and monologue are shown separately for the different forms of preschool.

TABLE 5. Frequency of dialogues between child-adult and child-child in full time (FTP) and part time (PTP) Swedish preschools, Nursery school (NS), Nursery class (NC) and Playgroup (PG). Percentages of total time

| | FTP | PTP | NS | NC | PG |
|---|---|---|---|---|---|
| Dialogue between | | | | | |
| child-grownup | 7 | 6 | 9 | 7 | 6 |
| child-child | 14 | 12 | 9 | 21 | 10 |
| No dialogue | 79 | 82 | 82 | 72 | 84 |
| | 100 | 100 | 100 | 100 | 100 |

Surprisingly enough it was found that in spite of rather great differences in staff/child ratio and group sizes the frequencies of dialogue between child and adult was very similar in S and B preschools. Is there an in-built structure in preschool practise that reduces child-adult conversation to less than 10 % of the total time?

In my own study the No dialogue category includes child-adult monologue in FTP and PTP (16 and 13 %), child-child monologue (37 and 36 %) and silence (25 and 33 % $p < .05$).

Only about one fifth of the observed minutes contained language between the child and the adult according to the Swedish study. In more than twice as many observations there was some kind of contact between the child and the adult. The frequencies of contact, with or without language, are shown in table 6.

TABLE 6. Frequencies of contact between children and adults in full time (FTP) and part time (PTP) Swedish preschools, Nursery schools (NS), Nursery class (NC) and Playgroups (PG). Percentages of total time

| | FTP | PTP | NS | NC | PG |
|---|---|---|---|---|---|
| Contact between<br>child and adult | 44 | 38 | 44 | 37 | 50 |

The figures indicate that the non-verbal communication varies to some extent between S and B preschools presumably due to differences in staff/child ratio.

In both the Swedish and the Sylva study analysis has been made as to which activity contain most child-adult communication. It appears that in both countries conversation was most common in non-play social interaction and domestic activity. This implicates that these situations, which are an important part of the socialization process, are particularly effective for the learning of social attitudes and values.

## INTERPRETATION OF RESULTS

### Swedish and British child care policy

There is a great variance among the B preschools which is not found in Sweden. In spite of the fact that FTP by tradition have a social and caring function and PTP an educational function, they are surprisingly similar as to educational content. During the last 20-30 years the organization of preschools in the municipalities has been regulated by the National Board of Social Health and Welfare. Rules and recommendations as to space per child, staff/child ratio, professional requirements of personnel, numbers and age combinations of children in a group has contributed to a homogeneous preschool situation. As shown by Kerstin Palmerus (a participant at this conference), family day care also has much in common with institutional preschool practise.

In spite of the differences between FTP and PTP in time extension, staff/child ratio and ages of the children, the activity pattern is very similar. The higher proportion of creative activity and the lower proportion of social and motor activity in PTP can be attributable to the shorter time. As the children are in PTP less than half the time compared to children in FTP, time is concentrated on more "educational" activities. In clock time, about one hour a day is used for structured activities in both kinds of preschool. Children in FTP are there about 7-9 hours a day which gives generous time for social interaction and personal attention to compensate absent parents.

A governmental report published by the National Commission on Child Care in 1972 (Barnstugeutredningen) has played a great role for organization and educational content of the preschools. It was followed by a number of publications on advise concerning educational practise that were used in the training of preschool teachers as well. This coincided in time with the tremendous expansion of preschool places mentioned earlier. Altogether, this central steering has contributed to a high homogeneity of preschools in Sweden as shown in international comparison by Andersson (1). His results show that children who start early in full time preschool are better adjusted to school and have better results than children who start preschool later or have other forms of child care.

As Swedish preschools are an important part of the total family welfare system, particularly the FTP are seen as necessary complements to family upbringing. The official goals of preschol education has an ideological stress to effectuate this. In the Educational Program for Preschools, the importance of the group is related to changes in society. Group experience is supposed to compensate the lack of siblings and give the child an opportunity to participate in a larger community than the family can provide. This is formulated in the following way:

*"In being members of a preschool group and having the opportunity to grow up and develop together with a group of peers, children in the preschool might be socialized into feelings of responsibility and solidarity, and develop friendship and lasting relationships"*

For this purpose great emphasis is put on the socialization process. This goal is clearly found to influence the practical work as shown in the high percentage of activity in small and big groups compared to the B preschools. Doing things together in cooperation is typical for our preschools in contrast to the B preschools where children more often do things by themselves, parallel or in pairs. The work in B preschools can be characterized as more task oriented than group oriented.

### Educational philosophy

It is apperent that in both countries there is an emphasis on play and self initiated activity that can be seen in contrast to the school preparing function found in most other European countries and in the USA. Much of the B preschool philosophy is in agreement with the basic principles guiding preschool education in S as formulated in the Educational Program.

*Activities should be linked to the children's own experiences and developmental stage*

*Learning and development is occurring all the time, not only during structured learning situations*

*Playing is the child's own concrete way of acting out and reflect upon experiences and impressions from the environment and the child should be given vast opportunities to play in the preschool setting.*

The respect for the child's own way of doing things and solve his/her own problems is in line with the thinking of Fröbel and later humanistic psychologists like Susan Isaacs in Britain who put these ideas into preschool practise.

However, our results indicate that there are great differences in emphasis on developmental vs socialization aspects. The high proportion av manipulative activities and gross motor play in B preschools seem to have a developmental goal in itself. The ages of the children may contribute to this, being younger than in the Swedish study.

Being members of a society and not only a family, the total social and intellectual development of the child are seen as primary goals for preschool education in S. The socialization process was particularly emphasised in the 70th. Transmission of values concerning common democratic goals was seen as a main goal in contrast to earlier emphasis on psychological development. The staff were seen as being important models indirectly imparting attitudes of responsibility for the group, cooperation and justice among the children. Mixed age groups was a means to foster these kinds of feelings.

Today this emphasis on the socialization process has diminished. Instead there is a return to more homogeneous age groups, usually 1-3 and 4-6. This is done in order to facilitate more goal oriented activity. There is also a return to more structure and planning of activities. These are often presented to the children as themes which penetrate different kinds of activities. This has led to an increasing demand for further education among the personnel. There is a renewal of ideological content and many preschools work out their own profile by putting stress on different content such as art work, ecology, drama, etc. In other preschools there is an increased stress on school preparation. Politically there is a change of rules as to public spenditure on parent cooperative preschools and other varieties of privately run preschools.

This development can be seen in relation to changing economic conditions.
A governmental proposition suggesting voluntary school start at the age of 6, accepted by the Parliament this year, has turned the attention to the school preparing function of the preschool. Particularly the 6 year olds are nowadays introduced into work with letters and figures during structured conditions for about 1-3 hours a week. A departmental commission is working on a new school curriculum covering also the preschool ages. Today, the problems of transmission from preschool to school at either 6 or 7, depending on parent decision, is a main concern for teachers and administrators on both school and preschool level.

## Function and organization of preschools

In B there is a large variety of preschools. Prof Pascal at Worcester univ. told me that in a recent study in Britain, 21 different varieties of preschools were included. Most of these do not offer full time care. Their functions are to be educational in contrast to S preschools where both care and education are the goals. A new term is however being introduced in B preschool research, **educare.**

In my own study I found that "educare" is closely connected to the time dimension. In spite of the fact that PTP have the same educational content as FTP it was found that PTP had a more school like structure. This appeared in the higher proportion of silence and watching in PTP, particularly among the girls. In a separate analysis of gender differences, the same gender pattern was found as in school, that is, boys talked more and got more attention from the teacher than girls. This was not found in FTP where instead the girls had more contact with the adults while boys to a great extent played together in big groups. The FTP thus offer an environment that enhances the girls' identification with the adults. As most of the staff are women this leads to better conditions for sex role identification among the girls than the boys, who instead seem to prefer male peers as identification objects.

Can S and B preschools be compared as to qualitative aspects?
No such intentions are made in the present study. However, there is an interesting longitudinal study by Osborn and Milbank (7) that relates kind of preschool attendance to school achievement at the age of 10. The study comprises over 13.000 children. In this is was found that preschool form is clearly related to school achievement Surprisingly enough, children who had attended Nursery class had the lowest averages on tests of reading and mathematics at the age of ten compared to children who had attended NS and PG. The results are astonishing in relation to the fact that NC are connected to primary schools. Children in NC spend about one third of their time in manipulative tasks and another third in pretend play but less time in adult led activity which is a much higher proportion than in both S preschools, NS and PG. Spending too much time on tasks that has as their goal to improve fine motor coordination done without adult interaction, combined with much pretend play, is found to have detrimental effects on later school achievement.

## Organizational factors

How much of the variance between the two studies are due to organizational factors like staff/child ratio, group size and age composition, etc?

In the S study relationships between these and the child observations were done. From these results as well as from results from studies done in GB and the USA, inferential conclusions are drawn to explain differences between the S and B preschools.

### Staff/child ratio

Staff/child ratio is found to have weak relationships to educational content. Instead the amount of communication and child-adult contact are found to be related to number of adults per child (Kärrby, Roupp et al). In our study the percentage of child-adult dialogues do not vary very much. Staff/child ratio thus doesn't seem to influence this kind of measure. On the other hand, the high percentage of dialogues between children in NC may be attributable to a low staff/child ratio as well as group size.

### Group size

Group size is found to be related to group interaction and communication. This was found in the S study, in larger groups there was more social play, a finding supported by Smith and Connolly in GB (10) and the Sylva study where more social play was found in larger centers (11). On the contrary in the S study social interaction was proportionally much more common in FTP where the groups are small and the staff/child ratio is high. In PG with small groups and many adults there is a clear relationship to higher frequency of contact between children and adults. Group size is therefore not judged to be related to the differences found between S and B preschools in any systematic way.

### Age

How much do differences in age of the children and age mixture in the groups explain our results? Data from the Sylva study indicates that the frequency of manipulation and to some extent gross motor play was higher among the younger children. As manipulation is combined with "creative" activities in the S study the comparisons still seem to be relevant.

Organizational factors are judged to play a minor role as explanation of the differences in the present study.

## Summing up

My main conclusion is that national child care policy has explanational value for educational practice in preschool and indirectly for children's learning and development. Preschool provision organized within a family support system has a function in relation to the whole family and includes the child as a part of a total environment. Preschool education is seen as a socialization process in which care and education have equal value. In Sweden, the child care system has grown out of a national interest to provide preschool children for all who need. As 80-90 % of both parents work outside of the family there is a high need for preschool places which draws a cost of the size corresponding to that of agriculture (2 % of the GNP).

Along with this aim there has been a central steering from the National Board of Health and Welfare that has created a homogeneous preschool situation and probably has contributed to a high quality on the average. A new policy from the Board is on the way, however. Their mission today is to turn over the decisions of rules and regulation to the local political boards. The task of the National Board toady is to follow up and evaluate what is happening on local level. Research and developmental work is important and a particular budget is allocated for this purpose. My intension in the present study has been to try to show that there is a relationship between what goes on at the central political level and what happens to the individual child in a preschool setting.

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**TABLE 3: b.**

Frequencies of different activities in Nursery school (NS), Nursery Class (NC) and Playgroup (PG) (Percent).

| | NS | NC | PG |
|---|---|---|---|
| Gross motor play | 31 | 15 | 20 |
| Art & Manipulation | 20 | 35 | 23 |
| Structured material | 5 | 3 | 3 |
| Pretend play | 15 | 31 | 21 |
| Adult led group | 14 | 10 | 26 |
| 3 R's & Probl. solv. | 5 | 1 | 3 |
| "Passive" | 7 | 5 | 4 |
| | 97 | 100 | 100 |

Revised data from Sylva p 123

Diagram 1: Comparisons of frequencies of different activities in Swedish and British preschools (percent)

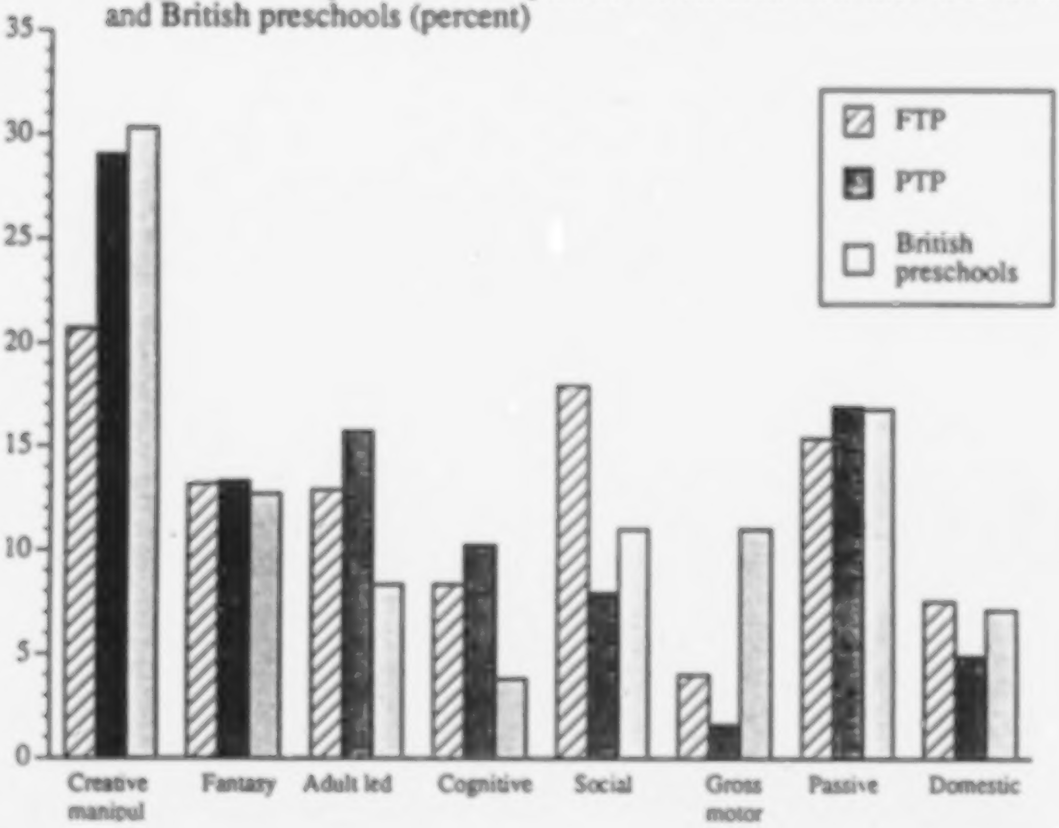
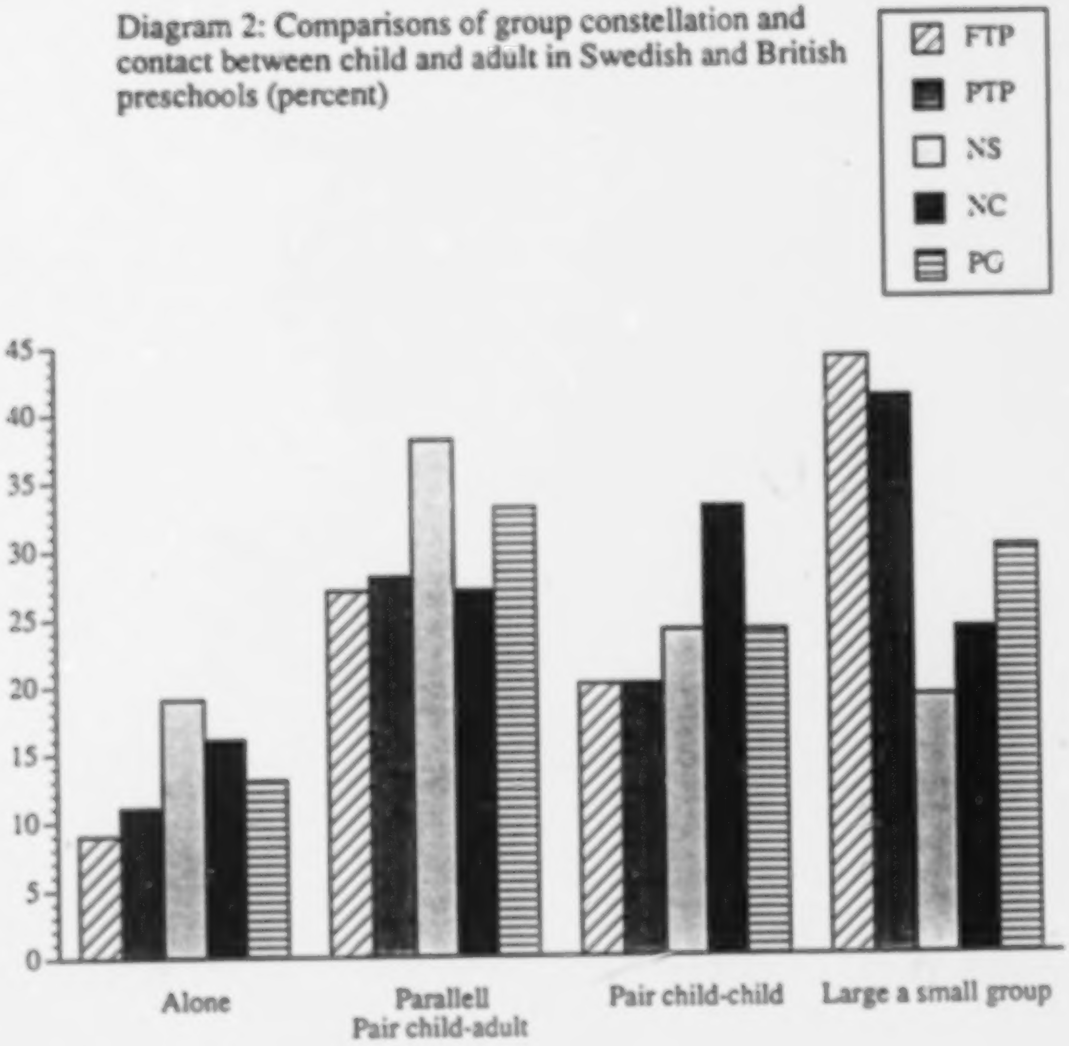


Diagram 2: Comparisons of group constellation and contact between child and adult in Swedish and British preschools (percent)



# INFANTS AND TODDLERS IN NEW ZEALAND CHILDCARE CENTRES

Valerie N. Podmore and Barbara H. Craig

## INTRODUCTION

The number of infants and toddlers aged under 2 years who attend childcare centres in New Zealand has increased in recent years. In 1989, 1261 infants attended licensed childcare centres for more than 4 hours per day, another 833 infants attended less than 4 hours, and the total number who attended was 2094 (1 July 1989 Early Childhood Education statistics, Ministry of Education). By 1990, 4827 infants and toddlers aged under 2 years were on the regular roll at licensed childcare centres, and another 1181 attended on a casual basis, bringing the total to 6008 (1 July 1990 provisional data, Ministry of Education). Precise comparisons across the years are precluded by the changes in the questions asked on the Ministry of Education forms and also, prior to 1989 separate data were obtained for children aged under 3 years but not for children aged under 2 years. The statistics for 1989 and 1990 do suggest, however, that there has been a marked increase in the attendance of infants and toddlers aged under 2 years at licensed childcare centres.

In 1988 the Meade Report identified children aged under 2 1/2 years as a priority area for provision in New Zealand, then in the July 1989 budget the Labour government introduced an increase in the funds allocated to provide for children aged under 2 years attending childcare centres.

Given the increased numbers of infants and toddlers in full care at licensed childcare centres, and the recent increase in funding to this sector, there was an urgent need for New Zealand research on quality care for infants and toddlers in childcare centres, which included consultation both with childcare centre staff and owners and with parents. A recent review of the international research literature on infants and toddlers in childcare centres has shown that quality care is developmentally important for children aged under 2 years, and important for the wellbeing of parents and childcare centre staff (Podmore, 1990).

The present study was initiated in response to a current need and to requests received from childcare personnel and from colleges of education. The study aimed to extend current knowledge within the New Zealand context about infants and toddlers who attend childcare centres.

The objectives were: to describe the organization of care for infants and toddlers in childcare centres, to observe and record the interactive experiences of infants and toddlers in full-time care, and to document views on developmentally appropriate care conditions.
The study addresses these research questions:

1. How are education and care organized in childcare centres in terms of physical arrangements for infants and toddlers?

2. What are the actual interactive experiences of infants and toddlers in childcare settings?

3. What aspects of care do childcare staff, parents, health personnel, and developmental theorists consider important for 0- to 2-year-old children in regard to:

   - physical development and health,
   - socio-emotional development and wellbeing,
   - cognitive and language development,
   - cultural-contextual needs;

and on what experiences or theories are these based?

4. What are the implications of the research findings for practice and for policy development with infants and toddlers?

The study comprises an Auckland component, funded on contract to the Ministry of Education, and a Wellington component, funded by the New Zealand Council for Educational Research and the Social Sciences Research Fund Committee. We will be talking about findings from both the Auckland and the Wellington components of the study.

# ORGANIZATION OF CARE FOR INFANTS AND TODDLERS

## Method

### *Sample*

Supervisors of 38 Auckland childcare centres were interviewed about the organization of care for children aged under 2 years. This represented almost 50 percent of the centres catering for under 2s in the greater Auckland region. Random numbers tables were used to select the centres from the Early Childhood Development Unit's lists of all childcare centres which provide full-time care for children aged under 2 years. Six of the private centres originally selected declined to participate, and random replacement centres were arranged. The participating centres covered a wide geographic area extending from Pukekohe and Waiuku in the south to Whangaparaoa in the north.

In Wellington, 16 supervisors were interviewed about childcare centre organization. This represented 50 percent of the centres licensed to cater for under 2s in full day care in the greater Wellington region. The region sampled extended north to the Kapiti Coast and to the Wairarapa. All of the randomly selected childcare centres from the Wellington region agreed to participate in the study.

### *Procedure*

Interviews with the supervisors were conducted at the childcare centres at mutually convenient times. Topics covered in the interview questions included: the physical arrangements for care (baby room or cross-age care), timetables and the structure of the day's activities, organization of staffing, sleeping arrangements, activities and play, age grouping and transition from groups, and staff duties. Questions were asked about past, present, and future organizational arrangements. The interviewers also toured the premises briefly, mapping the indoor and outdoor lay-out.

Photocopies of centre materials were collected, including examples of written materials about daily routines and menus, and any newsletters. Copies of the childcare centre charters were also collected in Auckland, where at the time of the data collection, charters had reached the first or second draft stage of development. The duration of each interview and centre visit was around 2 hours.

The interviews were tape recorded and transcribed by the interviewers. Supervisors were informed that centre materials and interview transcripts would be treated confidentially, that every effort would be made to protect the identity of the participants, and that the participating childcare centres would not be named in any reports on the study.

### *Analyses*

Analyses of the transcribed interviews were carried out to develop a classificatory system of organizational categories. Categories were developed to describe the childcare centre type, the persons responsible for management decisions, the organization of care by age grouping, and the number of full-time under 2s attending. Three Auckland and three Wellington centres representing contrasting organizational categories were selected for in-depth study.

## **Results:**

### **Organizational Interviews**

#### *Organizational Categories*

The types of childcare centres identified in the category analyses were: private centres, private chain centres, work based centres, centres sited at educational institutions, and alternative arrangements such as centres established by charitable trusts or the local community or council. Management decisions were the responsibility of: the centre owner; the owner/manager; the manager/supervisor; the supervisor/staff; or in the case of parent co-operatives, a parent/staff committee. Organization of care by age grouping was classified into these categories: under 2s centre, full babyroom, part cross-age, and full cross-age. The number of full-time under 2s attending the centre was another important variable relevant to centre organization.

Privately owned centres had one or more owners and were run as a private business. Private chain centres were one of a group of three or more centres under the same ownership. Work based centres were established by or for parents at the same work site (for example a hospital) or within employment covered by the same union (for example, the Public Service Association). Centres sited at educational institutions included those at secondary schools, universities, and polytechnics. Centres established by charitable trusts were associated with church groups and provided a community based service. Centres established by the local community or council also provided community based care.

The 38 Auckland and 16 Wellington centres were classified according to the centre type, the persons responsible for management decisions, the organization of care by age grouping, and the number of full-time under 2s attending.

Organizational data collected from the Wellington region showed that relatively similar numbers of childcare centres were classified into each of the centre type categories. Of the 16 centres, 2 were privately owned and another 2 were private chain centres, 3 were work based, 3 were sited at educational institutions, 3 were established by charitable organizations or trusts, and 3 were established by the local community or council.

At Auckland, there were more privately owned childcare centres. Among the 38 centres in the Auckland region, 17 were privately owned (one of these was also work based) and another 3 were private chain centres, 6 were work based, 8 were based at educational institutions, 1 was owned by a charitable organization, and 3 were established by the local community or council.

At the work based childcare centres and at centres sited at educational institutions, management decisions tended to be made by parent committees with staff representation. Several centres at educational institutions had a parent-staff committee and a Board of Trustees. At the private centres, management decisions tended to be made by the owner and/or the centre director (supervisor), usually in consultation with the staff.

The age grouping most frequently found at both the Auckland and the Wellington centres was part cross-age care.
Of the 16 Wellington childcare centres, 2 were under 2s centres, 3 provided predominantly full babyroom care, 8 had part cross-age grouping of care with some separation of the under 2s, and 3 had full cross-age care. The number of infants and toddlers who attended full time ranged from 1 to 5 at the centres with full cross-age care, to 7 to 13 in centres which catered entirely for children aged under 2 years.

Among the 38 Auckland childcare centres, 4 were under 2s centres, 2 provided predominantly full babyroom care, 24 had part cross-age grouping of care with some separation of the under 2s, and 8 had full cross-age care. The number of children aged under 2 years who attended full time ranged from 0 to 8 at the centres with full cross-age care, to 3 to 25 at centres which catered entirely for infants and toddlers.

### *Childcare Centres Selected for In-depth Study*

Six centres, three in Auckland and three in Wellington, were selected for further in-depth study. The six centres represent contrastive organizational categories. They include:

1. a private centre where the owner is responsible for decision making, and the care for the 6 full-time under 2s is organized on a part-babyroom part-cross age basis (licensed for 6 under 2s);
2. a centre established by a charitable organization, where decisions are made by staff and parents, and the care of the 5 full-time infants is organized predominantly in a babyroom situation (licensed for around 7 under 2s);
3. a work and community based centre where management decisions are the responsibility of a parent-staff committee and care of the 7 full-time under 2s is part-cross age (licensed for 8 under 2s on a full-time basis);
4. an on-site work-based centre with a parent committee responsible for decisions and part-to-full cross-age care for the 5 full-time under 2s (more infants attend part-time licensed to cater for 12 under 2s);
5. a centre at an educational institution, where decisions are made by a parent committee and care of the 2 full-time under 2s is organized on a full cross-age basis (licensed for 4 under 2s);
6. a centre which is one of a private chain, where the centre director and advisor are involved in decision making, and the centre caters entirely for infants and toddlers aged under 2 1/2 years; 11 under 2s attend full time (licensed to cater for 40 under 2s).

# OBSERVATIONS OF INFANTS' AND CAREGIVERS' INTERACTIONS

## Method

### *Sample*

At the three Auckland and three Wellington centres selected for intensive observation, a total of 36 infants and toddlers were observed using a trialled and adapted version of Howes (1983) 18 infant-caregiver interactive behaviour categories. At each centre between 2 and 11 infants and toddlers were observed. This represented a complete population of all infants and toddlers aged under 2 years who attended the six centres on a full-time basis.

Half of the children attended Auckland centres and half were at Wellington centres. More boys than girls attended full-time (25 boys, 11 girls). The children's ages ranged from 7 to 23 months. More of the children were first-born than later-born.

The majority of the infants were identified by their parents as Pakeha or European. Although the supervisors described several of the centres as ethnically mixed, there were relatively few children aged under 2 years from minority ethnic groups attending the centres full time. 2 boys were described as Chinese, 1 as Eurasian, 1 as Maori and Pakeha, and 1 as Samoan.

Families from higher and middle socio-economic groups were over-represented in the sample. These trends may reflect the continuing high cost to parents of full-day centre-based care. The ethnic group composition of the sample also seems partly attributable to the expansion of the Kohanga Reo and the Pacific Island Language Nests in Auckland and Wellington.

### *Observational Measure*

The observational categories used in this study were based on Howes (1983) and Rubenstein and Howe's (1979) categories. We adapted the categories during a pilot study carried out in Wellington (Podmore & Craig, 1990). The 18 categories include caregiver and infant behaviours like reciprocal responsiveness and stimulation, which are considered developmentally important for infants and toddlers (Honig & Lally, 1988; Howes, 1986).

### *Procedure*

Each infant was observed for 40 minutes on each of 2 separate days. The researchers used an electronic timing device to record the infant's behaviour and caregiver interactions. Information was also recorded about contextual variables like the number and gender of caregivers, and the number of children, present. At three of the six centres, some interactions with male caregivers took place, although all of the staff working specifically with the under 2s were female staff members. The researchers recorded notes about the activities in which the infant or toddler participated. Most infants and toddlers were observed both indoors and outdoors while engaged in a range of play activities and care routines. Times when the infants and toddlers were actually sleeping were excluded from the observations, although they were observed while being settled into cots or settled to sleep. Main meal times were also excluded from these observations.

### *Inter-observer Reliability Data*

Inter-observer reliability data were collected on about 20% of the total observations and calculated using the percentage method. There was a satisfactory mean of 88.09%.

### *Data Analyses*

Where sample sizes permitted, the differences in group mean scores were analyzed. F tests using least-squares estimates of means, and Scheffe's multiple comparison tests, were computed.

## Results:

### Category Observations of Caregiver-Infant Interaction

The mean frequencies of the 18 interactive behaviours showed that the behaviours which occurred most frequently were infant's solitary activities, caregiver talks to infant, infant interacts with peer, and caregiver touches, hugs, or holds infant. Behaviours observed most rarely were caregiver expresses negative affect, infant violates adult standards, and caregiver ignores request or responds negatively to infant's distress.

Means and standard deviations on the 18 behavioural categories were analyzed separately by observational day (day 1 and day 2), by child gender (26 boys, 11 girls), by childcare centre type (including private and non-private ownership, cross-age and same-age care), and by infant's age (16 infants aged 7 to 17 months, 20 toddlers aged 18 to 23 months).

### *Child Gender*

The mean scores suggest that there were no major differences attributable to child gender on most of the 18 interactive behaviours. Subsequent analyses of variance showed a trend for the female infants to receive positive responses to their social bids more frequently than the male infants. An example of a caregiver's positive response was:

> The infant cries. The caregiver responds within the 15-seconds observation time and says: "What's the matter?". The caregiver reaches to pick up the infant.

However, there were no differences in the frequency with which caregivers ignored or responded negatively to boys' and girls' requests or distress.

*Infants' and Toddlers' Ages*

Peer interaction occurred more frequently among the older toddlers than among the younger infants (M = 30.30, S.D. = 8.91 for older toddlers; M = 18.94, S.D = 10.68 for the younger infants). Some examples of peer interaction were:

> A toddler asks another toddler near him:
> "What's that?";
> An infant sitting on the floor is gazing reciprocally at another infant.

Follow-up analyses of variance showed a trend for the older toddlers to have caregivers talk to them more frequently (F = 4.65, p<.05; Scheffe test significant at p<.05).

Compared with the younger infants, toddlers aged 18 months and over also received more positive responses from caregivers to their social bids (F = 7.13, p<.05; Scheffe test significant at p<.05). Younger infants expressed more negative affect to caregivers (F = 10.59, p<.01; Scheffe test significant at p<.05). Three examples of expressing negative affect were:

> The toddler falls off his chair and cries.
> A toddler pinches the infant, and the infant screams.
> The toddler shouts at a caregiver.

The most strongly significant age difference was found on the behaviour, infant/toddler interacts with peer. Older toddlers interacted with their peers more frequently than did younger infants (F = 13.6, p<.001; Scheffe test significant).

*Childcare Centre Type*

There were some similarities across the centres on some behaviours. However, the mean score on caregiver touches, hugs, or holds infant ranged from 12.5 at one centre to 28.6 at another centre; the mean score on caregiver talks to infant varied from 35.3 at one childcare centre to 57.4 at another centre; and the mean occurrence of infants' solitary activities ranged from 46 at one centre to 87 at another centre.

When the data for the private and non-private centres were combined and compared, few major differences were evident. Subsequent analyses of variance were interpreted with considerable caution because there were only two private centres and four non-private centres in the sample. The results supported a trend for caregivers at non-private centres to touch, hug, or hold infants and toddlers more frequently (F = 15.93, p<.001, Scheffe test significant).

### *Adult-Child Ratios*

The ratios of staff members to children were recorded from each coding sheet, that is for each 8 minute interval for each infant or toddler. In almost all cases the observed adult-child ratios were better than those required by minimum standards.

There were no major variations in the ratios experienced by male and female infants. The ratios differed very slightly according to the child's age. Younger infants aged under 18 months experienced a mean ratio of 1 staff member per 3.73 children, whereas toddlers aged 18 months and over had a mean ratio of 1 per 4.47.

The mean ratio for the combined non-private childcare centres was 1 adult per 3.5 children. At the private childcare centres, the mean ratio observed was 1 to 4.7.

At each of the six childcare centres, the mean ratio of caregivers to infants and toddlers exceeded the minimum standards, and at some centres the observed mean ratios almost reached the recommended quality standard of 1 caregiver per 3 infants.

## ETHNOGRAPHIC OBSERVATIONS

Ethnographic week-long observations were conducted at the three Auckland and three Wellington centres selected for intensive observation. It was planned that each centre would be observed for five consecutive days for the duration of the day that the centre was open. However, in two of the centres the selected weeks were interrupted by atypical events that had never occurred before at either centre. Out of consideration for the staff and childcare families, the researcher returned to conduct further observations on a later week when the staff and children were not under unusual stress. In all cases the centres were observed for at least five days.

Using participant observation techniques (Spradley, 1979), the experiences of the infants and toddlers in these selected centres were recorded in detailed ethnographic fieldnotes. Of particular interest were observations of interactions of parents with staff as the infants and toddlers were dropped off and picked up from the centre, and observations of these children's interactions with their peers and with staff throughout the day. The daily routines of each centre were documented in detail, as were activities, resources, and equipment used in the care and education of children under 2 years. The focus was on identifying similarities and differences in routines and activities, contacts with parents, health personnel, and any other visitors as well as caregiver-child interactions and child-child interactions. The aim was to document the diverse range of organizational features of New Zealand childcare centres and provide descriptive data on the daily experiences of infants and toddlers in full-time childcare. During the course of the week informal interviews and conversations were conducted with centre staff to discuss in depth various practices that were observed. These conversations were recorded in the fieldnotes.

Analyses of preliminary ethnographic data are nearing completion.

# MEETING THE NEEDS OF INFANTS, PARENTS, CHILDCARE CENTRE STAFF, AND COMMUNITIES

## Method

Interviews were carried out to gather information about how to meet the needs of infants and toddlers in group care, and the needs of parents, centre staff, and the community.

### *Participants*

The parents of the 36 infants and toddlers who attended the six selected centres full-time were invited to participate. Parents were asked to participate in an interview, either together or separately, in a mutually convenient place at a mutually convenient time. In 23 cases both parents were interviewed together. Although the parents clearly led very busy lives, at least one parent of each infant and toddler was interviewed.

The mothers' ages ranged from 23 to 40 years , and the fathers' ages ranged from 25 to 42 years. In many cases, both parents were New Zealand born.

Supervisors of the six centres, and staff members working with the children aged under 2 years, also participated in interviews. At each centre, between 2 and 4 supervisors and staff members were interviewed, with a total of 16 staff interviews.

None of the centres identified a Plunket nurse who visited the centre regularly, although one Public Health Nurse was interviewed.

### *Procedure*

The in-depth interviews ranged in duration from 1 to 3 hours. Interviews took place in a range of venues, suggested by the participants. Many of the parents were interviewed in their homes in the evening.

Wherever consent was granted, the interviews were tape-recorded then transcribed by the interviewers. Participants were assured that anything they said would be treated confidentially.

### *Data Analysis*

Categories were developed for coding the responses of parents, staff, centre owners, and visitors. In this study all interviews were sampled when compiling the coding categories. This procedure, although time consuming, ensured that the coding categories were comprehensive across the total sample.

## Results:

### Views of Parents, Staff, and Centre Owners and Visitors on the Needs of Infants and Toddlers, Parents, and Caregivers

### *Infants and Toddlers' Emotional, Spiritual and Social Needs*

When the parents of the 36 infants and toddlers were asked, "What do you see as the main needs of infants and toddlers (aged under 2 years)?", 30 (83%) spontaneously mentioned aspects of children's emotional needs. In addition, 19 parents or couples (53%) referred to infants' and toddlers' intellectual needs, 16 (44%) to physical needs, 15 (42%) to social needs, 9 (25%) to health needs, and 4 to language needs. Cultural needs were not mentioned spontaneously at this point.

When asked specifically about infants' and toddlers' main emotional needs or spiritual needs, parents most frequently mentioned love and affection (28 parents, 78%). Some parents commented on the need for security, for limits and/ or discipline, for comfort or support when hurt or upset, and for identity, self-esteem, confidence, or self-concept development. A few parents talked about the need for praise and reinforcement, or about spiritual needs.

Most parents spoke specifically about their own infant's or toddler's need for love or affection:

> Father: He likes cuddles.
> Mother: And gives cuddles.
> Father: He loves joining in and giving cuddles.

The majority of the staff members also mentioned love and affection as emotional needs of infants and toddlers. There were very few differences across the six childcare centres in the parents' and staff members' views on emotional needs.

When asked about the extent to which infants' and toddlers' emotional needs are met in childcare centres, most parents expressed fairly positive views, with 18 (50%) satisfied, 12 (33%) very positive, 4 (11%) giving mixed responses, and 1 a neutral response. Among the staff members, 10 (63%) were satisfied, 5 (31%) gave mixed responses, and 1 a neutral response. The centre owners, Board member, and centre visitor expressed fairly positive views. None of the participants expressed a negative view on the extent to which emotional needs are met in childcare centres.

Similarly, none of the participants expressed a negative view on the extent to which childcare centres cater for infants' and toddlers' attachment needs. Staff members were notably positive about meeting attachment needs, and most parents were satisfied. More than half of the parents identified a caregiver who was regarded as their infant's or toddler's favourite.

Overall, most parents and many staff members were fairly satisfied about the extent to which infants' emotional and attachment needs were met in the childcare centres.

### *Social Needs*

When asked about infants' and toddlers' main social needs, both the parents and the childcare centre staff talked about the importance of contact with peers and with caregivers. Comments about contact with peers included:

> Mother: I think creche is a good place for him to learn to be part of the group rather than just by himself, which is quite important if they can learn it at a very early stage. That's one advantage of putting him in creche.

Most parents, almost all staff members, and all of the other participants were satisfied or very positive about the extent to which infants' and toddlers' social needs are met in the childcare centres.

When the parents and staff members were asked what they would like to see done differently to meet the needs of infants and toddlers in childcare centres, nearly half of the parents said they were happy with what was being done, and they had no suggestions about changes. However, about a quarter of the parents and two thirds of the staff members recommended that having higher ratios of staff to infants would help towards meeting infants' needs.

### *Infants' and Toddlers' Cognitive and Language Needs*

Infants' and toddlers' intellectual needs were another priority area, with over half of the parents and around half of the staff members spontaneously mentioning intellectual needs as a main need of infants and toddlers. When asked specifically about the main intellectual needs of infants and toddlers, half of the parents mentioned stimulating experiences, such as being presented with toys and having an adult interact with them.

Parents also mentioned books, and a general need to learn, develop, or progress. Most of the childcare centre staff mentioned experiences and stimulation as main intellectual needs of infants and toddlers, some commented on stimulating equipment and toys, and some referred to verbal stimulation, books, and being read to. Fairly similar responses came from the other participants. Both of the childcare centre owners mentioned verbal stimulation as a need.

When asked to what extent infants' and toddlers' intellectual needs are met in the childcare centres or in group care situations, most parents expressed positive views. Similarly, most staff members and other participants responded positively or very positively, and none of the participants made negative comments.

Some diverse views were recorded on infants' and toddlers' language needs. Many participants said that verbal stimulation and being able to talk to others are important. However, the parents' perceptions of bilingual needs varied. Although 6 parents spoke in detail about young children's bilingual needs, 3 other parents advocated using the English language only.

In response to a question about the extent to which infants' and toddlers' language needs are met in childcare centres, many parents were quite positive, but a few were not satisfied. One parent who made a more negative statement was concerned that her toddler, aged 16 months, was the oldest in the group and interacted mainly with younger infants.

All of the staff members, centre owners, and centre visitors were satisfied or very positive about the extent to which the childcare centres meet infants' and toddlers' language needs. When the participants were asked, "What is done in the programme to meet the infants' and toddlers' language needs?" they most frequently mentioned music and rhymes, talking to them, reading stories, and having conversations.

### *Infants' and Toddlers' Physical and Health Needs*

The physical and motor needs mentioned most frequently by the participants were the need for activity in general and the need for outdoor space. When asked about the extent to which infants' and toddlers' physical needs are met in the childcare centres, most participants responded quite positively, with a few exceptions where space was a concern.

Comments made by parents and childcare centre staff about infants' and toddlers' health needs show some emphasis on infectious diseases and the prevention of cross-infection. Responses on the extent to which infants and toddlers' health needs are met in the childcare centres were fairly mixed. However, most of the staff and almost two thirds of the parents were satisfied.

Several parents who expressed mixed views were concerned about aspects of nutrition. Others who were reasonably satisfied were concerned about cross-infections or about minor injuries from peers, such as biting.

### *The Cultural and Community Context*

There were some differences in the way people perceived cultural needs. Many participants commented in detail on infants' and toddlers' cultural needs. However, some parents expressed the view that children aged under 2 years have no cultural needs.

When asked about the extent to which infants' and toddlers' cultural needs are met in childcare centres, most parents were either fairly satisfied, or they thought the question irrelevant because they believed children aged under 2 years have no cultural needs.

In response to the question, "How are community and cultural needs met in centres catering for young children?", parents and staff members most frequently commented that the centres meet the communities' need for care; or they mentioned visits by the centre to shops, offices, commercial centres, and the park.

When they were asked if there was anything they wanted to see done differently in the childcare centres to fit in with their own community or culture, about two thirds of the parents responded that they were quite happy with the centre practices. A few stated that they were satisfied and they recognized their own culture as a minority one. A few parents wanted more contact with the elderly in the community, more male staff members, or more information about childcare available to the community. A third of the staff members wanted more contact with other educational organizations including the local school, the kohanga reo, and the playcentre. A centre visitor recommended improved town planning and siting of childcare centres.

### *The Parents' Needs*

Most of the parents perceived their main need as knowing their infants or toddlers were safe, secure, well cared for, learning well, and in quality care. About a third of the parents discussed the need for communication with staff; 6 mentioned financial needs, 6 professional and work needs, and 6 the need for flexibility of childcare centre hours; 4 spoke of the need for a lack of guilt and confidence in the decision to use childcare, and another 4 of staff qualities, and 2 wanted more involvement in management and decision making.

The staff members' views on the needs of parents focused mainly knowing the child was safe and well cared for, and on parent-staff communication. When questioned further about communication between staff and parents, almost all parents and staff described direct verbal communication as most effective.

There were some differences in the extent to which parents wanted to be involved in the childcare centres. However, most mothers wanted the same involvement or more involvement, and many mentioned time pressures as a problem.

When asked about health visits at childcare centres, over a third of the mothers wanted health personnel to visit the centres, and another third were in favour of routine visits to the centre provided certain conditions were met like informed consent, but almost a third preferred to make their own arrangements for their infants' health care. The fathers' opinions were fairly similar, although slightly fewer fathers wished to make their own arrangements.

The fees paid by the parents ranged from $110 to $143 per week. Parents tended to view the services provided as very good value. Some parents thought they could not afford to have more than one child enrolled at a childcare centre, and a few parents were struggling to pay the fees.

Most parents and staff members were satisfied with the way in which the childcare centres catered for parents' needs. Some suggestions were made about changes that could be made to meet parents' needs. Many parents wanted more communication with staff, especially about the programme. Most staff members also wanted more communication with parents.

### *Childcare Staff Members' Needs*

The childcare centre staff members tended to describe their main needs in terms of having breaks or time out, and receiving adult support. The parents talked about staff needs mainly in terms of wages and breaks or time out.

These comments made by childcare workers from different centres illustrated the concern about breaks and working conditions, adult support, and stress:

> (Staff need) staff support from each other. An adequate amount of time out. If you've got a new

child crying, just adequate time to recover from that.

Both of the childcare centre owners also mentioned the need among childcare centre staff for adult support, breaks and time out, and for staff training.

When asked specifically about adult-child ratios, staff members tended to advocate a 1:3 and sometimes 1:2 ratio, with several commenting in detail on the need for high staff-infant ratios to enhance the quality of care.

In relation to payment of staff, many of the childcare workers thought they were better paid at their own centre than staff were at some other centres. Three quarters of the staff members were on the Consenting Parties Award or higher.

On the topic of staff training, half of the staff members recommended more inservice training, and several wanted more trained staff employed.

All of the participants were asked what they would like to see done differently to meet the needs of childcare staff who work with children aged under 2 years. The parents most frequently suggested more pay in general and more staff training, then better hours and breaks, improved staff-child ratios, and more recognition and status. Similarly, the staff members most frequently mentioned more staff training, better hours and breaks, and improved ratios.

### *Funding Issues*

More than half of the parents and about two thirds of the staff were aware of the government subsidy to childcare centres for infants aged under 2 years, which was introduced in the 1989 budget and was in the process of implementation during the early phases of this study. The participants were asked what they would like to see the subsidy spent on, and were provided with a list of options to prioritize.

Better staff ratios was the most frequent response from both the fathers and the mothers. Among the staff members, better ratios ranked first equal together with more equipment and resources for the under 2s. Clearly, staff-child ratios were a major priority or the participants.

### Perceptions of Professionals

Representatives of relevant professional groups were also invited to participate in interviews. They included representatives of: the New Zealand Childcare Association/ Te Tari Puna Ora O Aotearoa; the Combined Early Childhood Union of Aotearoa; the early childhood sections of two Colleges of Education; the Medical Association of New Zealand; the New Zealand Nurses Association; and the Education Department of a university.

Some of the main themes evident in transcripts of the interviews with representatives from professional groups were: staff training, with reference to the learning needs of infants and toddlers; meeting the emotional needs of infants; early childhood funding; and childcare infants' and toddlers' health needs.

### *Staff Training and Education Needs*

Representatives of several professional groups commented extensively on the training needs of childcare staff. There was some optimism about the impact of the 3 year early childhood training programme. Other participants emphasized the importance of in-service training, especially in relation to meeting infants' and toddlers' language, cognitive and learning needs.

Representatives of educational and professional groups described links between the training needs of staff, the nature of parent-staff communication, and the quality of care for infants and toddlers:

> I think that is a staff need - to be professional, to be comfortable and to feel good about what you're doing. I guess it's linked with competence, if you feel competent about what's needed, if you know what is required, you will work at achieving quality care.

### *Infants' and Toddlers' Emotional Needs*

The central importance infants' and toddlers' emotional and spiritual needs was supported. Training was seen as important if these needs are to be met.

### *Early Childhood Funding*

The participants spoke positively about the impact of the increased funding provisions on the quality of centre-based infant care. When asked about priorities for using the new funding, some replied:

> Can I just say that since the increased funding did come in for under 2s, probably from my experience there has been a change in that the focus has moved to looking at quality, quality care rather than just the babysitting aspect. I think the increased funding has had a lot to do with looking at quality now, in most of the centres.

*Health Needs and Recommendations*

Views on the health needs of infants and toddlers varied in relation to the interviewees' perceptions and experiences of health or wellness, and illness. Several interviewees expressed concern about nutrition and breast feeding.

It was also recommended that there is a need for employers to be accommodating, and for families and communities to be aware and to support childcare centre parents when they are caring for their unwell infants and toddlers.

## CONCLUSIONS AND IMPLICATIONS

### Organization of Care for Infants and Toddlers

This study shows that contrastive categories of childcare centre organization are associated with:

parent involvement and participation in management;
centre type: work based, educational institution, charitable trust, private ownership;
cross-age versus babyroom care;
number of infants and toddlers attending.

### Interactive Experiences of Infants and Toddlers

The results of the observations suggest that:

the observed ratios exceeded minimum standards requirements at all centres.
Very low frequencies of "negative" behaviours occurred at all centres. This is consistent with findings in some U.S. childcare centres, see Howes (1983).
Some differences in the frequency of verbal interactions were found. Older toddlers interacted with peers more frequently.
Facilitative physical interactions were less frequent at private centres; however one private centre had a very high incidence of caregiver mediates objects. Perhaps education and care priorities vary at different centres according to centre philosophies.

### Infants' and Toddlers' Needs

Views and experiences concerning infants' needs show that:

emotional/ (spiritual) needs were seen as a priority area by parents, professionals, and staff.
Differences were found in parents' views on cultural needs, based on their experiences.

### Implications for Policy and Practice

Some implications of the research findings for practice and for policy development with infants and toddlers are:

### Staff Management Issues

Observations were made that had implications for the management of staff and other staffing issues. For example, the continuity of staff and the rotation of staff were important concerns. There was no agreement on the one best way of managing the use of relieving staff, the staff members' non-contact time, and their breaks. Findings from the interviews with parents and staff members indicate that staff-child ratios were a prominent concern, relevant to quality care and to meeting the emotional needs of infants and toddlers.

### Staff Training Issues

Training implications and issues apparent in this study concerned child management, physical space, and the attention allocated to each child. Interviews with staff members, other professionals, and parents showed their concern about the provision of, and access to, ongoing inservice training. Findings by Howes (1986) indicate that staff training, including regular, ongoing inservice training, influences the quality of care received by toddlers in childcare centres.

### Curricula for Infants

The observations showed that there was diversity across the childcare centres, for example in the amount of physical contact between caregivers and infants and in the frequency with which caregivers mediated objects. The week-long observations suggest variations between centres in the pacing of the day and the organizing of activities. Interviews with the parents suggested the need for more staff-parent communication about the programme.

### Government Agencies and Support

There were also some findings concerning government agencies and support. The interviews with parents, staff, and other professionals suggested a need for more regular health visitors to the childcare centres. They also emphasized the need for changes in the work place towards the provision of more adequate parental leave when young children are ill.

### Further Research

Further research would be useful on the longer-term experiences infants who attend New Zealand childcare centres.

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